



**ALLENTOWN**

**BUREAU OF HEALTH**

**2020 ACT 315/12 GRANT APPLICATION**

**and**

**PROGRAM PLANS**





**Vicky Kistler, MEd**

**Director of Health**

Bureau of Health

245 N. Sixth Street

Allentown, PA 18102

Office: 610-437-7708 Fax: 610-437-8799

vicky.kistler@allentownpa.gov

March 25, 2020

Douglas Koszalka, Bureau Director  
Bureau of Community Health Systems  
Pennsylvania Department of Health  
625 Forster Street  
Room 628, Health & Welfare Building  
Harrisburg, PA 17120

Dear Mr. Koszalka:

In accordance with the requirement of Act 315 (Local Health Administration Law), please find attached an electronic copy of the Allentown Health Bureau's 2020 Grant Application and Program Plans. As detailed by the budget overview section of the document, in 2020 the Health Bureau anticipates an Act 315 grant of \$606,000.00 and an Act 12 grant of \$54,040.00, respectively.

Please contact my office (610) 437-7760, ext. 2824, if any questions arise. As always, thank you for your interest and assistance.

Sincerely,

Vicky Kistler, MEd  
Director of Health

Enclosure

VK/tlf

# Table of Contents

## **PART 1 Personnel Management**

Board of Health .....	1
Administrative and Supervisory Personnel and Salary .....	2
Personnel Resource Summary .....	2
Organizational Chart .....	5

## **PART 2 Fiscal Management**

Budget for 2020 .....	6
Expenditures for 2019.....	7
2020 Estimated Budget by Unit/Revenue by Source .....	8
2019 Budget by Unit/Revenue by Source .....	9
Budget Summaries .....	10
Categorical Health Grants.....	11

## **PART 3 Program Plans**

Introduction .....	12
2020 Administrative and Supportive Services Program Plans .....	13
2019 Administrative and Supportive Services Accomplishments.....	21
2020 Personal Health Services Program Plans	
Chronic Disease Control .....	29
Communicable Disease .....	35
Maternal and Child Health .....	42
2019 Personal Health Services Section Accomplishments	
Chronic Disease Control .....	52
Communicable Disease .....	57
Maternal and Child Health .....	62
2020 Environmental Health Services Program Plans	
Environmental Health Services Section.....	70
Food Protection.....	73
Environmental Control.....	81
Institutional Sanitation and Safety .....	88

Injury and Violence Prevention.....	93
Public Health Emergency Preparedness .....	102
2019 Environmental Health Services Section Accomplishments	
Food Protection.....	112
Environmental Control.....	116
Institutional Sanitation and Safety .....	120
Injury and Violence Prevention.....	122
Public Health Emergency Preparedness.....	127
<b>PART 4 Appendices</b>	
Appendix A	
Breast Cancer Screening Services Utilization.....	A-1
Cervical Cancer Screening Services Utilization.....	A-2
Appendix B	
Heart Disease Deaths .....	B-1
Overweight and Obesity rates for Youth.....	B-2
Overweight and Obesity rates for Adults.....	B-3
Appendix C	
Active TB and Latent TB Infection Cases.....	C-1
Active TB Cases by Race/Ethnicity .....	C-2
Appendix D	
HIV Tests Performed/Number of New HIV Positives.....	D-1

# **Part I**

# **Personnel Management**

**BOARD OF HEALTH**

<b>NAME</b>	<b>CATEGORY</b>	<b>TERM OF OFFICE</b>
David Bausch	Retired Administrator	January 9, 2013 through January 8, 2023
Paul K. Gross, MD	Physician	January 1, 2020 through Jan 1, 2025
Stephen K. Katz, MD	Pediatrician	January 2, 2016 through January 2, 2021
Oscar A. Morffi, MD	Pediatrician	January 2, 2016 through January 2, 2021
Kevin A. Vrablik, MD	Occupational Medicine/ Medical Examiner/ Medical Review Officer	December 17, 2014 through January 1, 2024

**ADMINISTRATIVE AND SUPERVISORY**

**PERSONNEL AND SALARY**

<b><u>Name</u></b>	<b><u>Category</u></b>	<b><u>#FTE</u></b>	<b><u>Salary</u></b>
Vicky Kistler	Director	1	\$104,182
Marcelo Gareca	Medical Advisor	On Call	Gratis
Belle P. Marks	Associate Director for Personal Health	1	\$88,765
Garry Ritter	Associate Director for Environmental Health	1	\$80,340
Terry Fasano	Office Manager	1	\$57,616
	Clerk III	6.0	\$270,254

**Personnel Resource Summary**

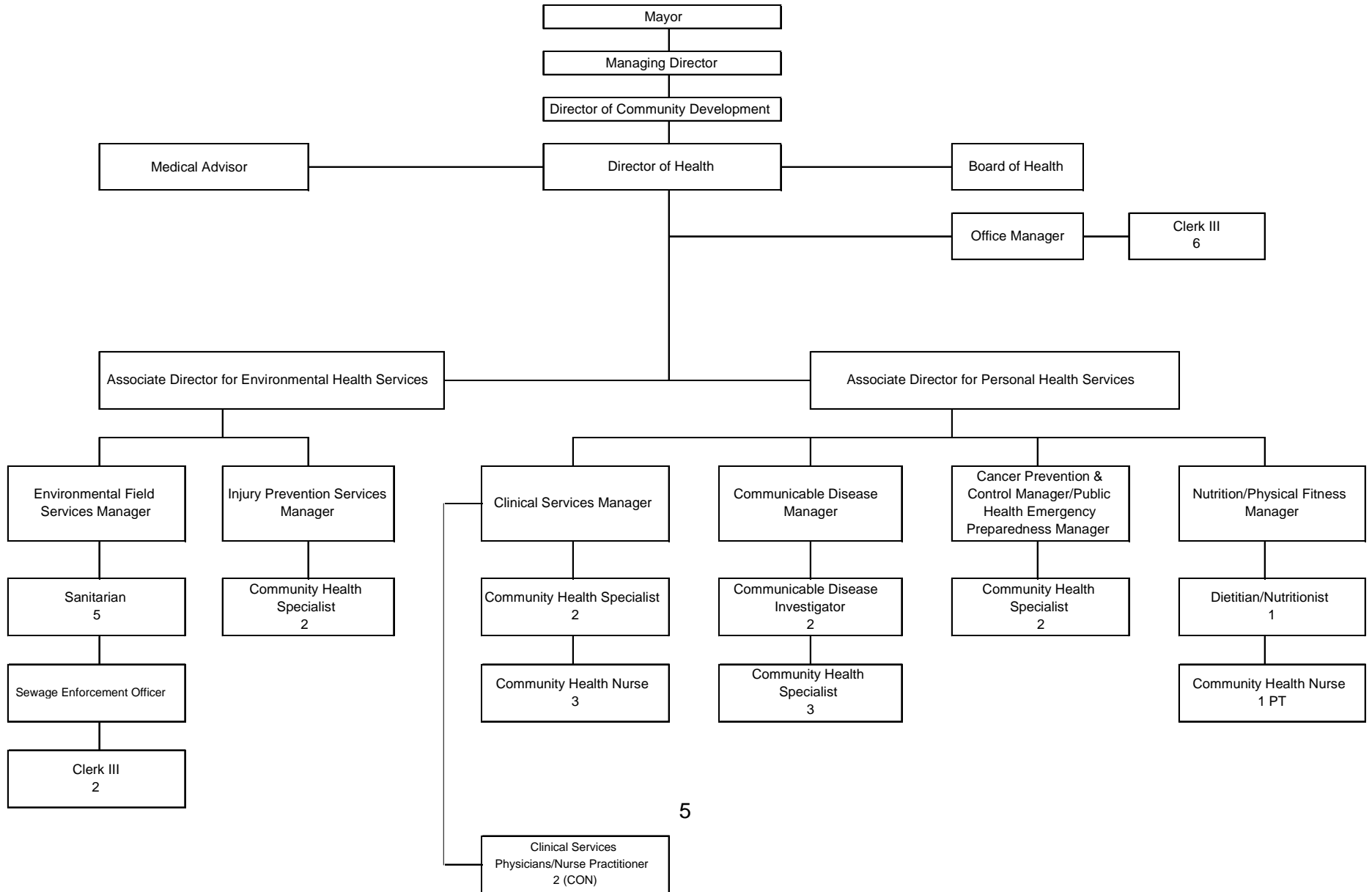
<b><u>Functional Unit</u></b>	<b><u>Classification</u></b>	<b><u>#FTE</u></b>	<b><u>Salary</u></b>
<b><u>Personal Health Services</u></b>			
Nutrition & Physical Activity Program	Program Manager	1.0	\$77,324
	Dietician/Nutritionist	1.0	\$62,616
	Community Health Specialist	1.0	\$56,383
	Community Health Nurse (P.T.)	0.5	\$31,971

<b><u>Functional Unit</u></b>	<b><u>Classification</u></b>	<b><u>#FTE</u></b>	<b><u>Salary</u></b>
Cancer Prevention Program	Program Manager	1.0	\$75,660
	Community Health Specialist	1.0	\$56,383
Communicable Disease	Communicable Disease Manager	1.0	\$67,834
	Communicable Disease Investigator	2.0	\$119,056
	Community Health Specialist	3.0	\$169,149
Maternal Child Health/Lead Poisoning/Immunization	Clinical Services Manager	1.0	\$71,084
	Community Health Specialist	2.0	\$110,014
	Community Health Nurse	3.0	\$185,253
<b><u>Environmental Health Services</u></b>			
Food Service Sanitation	Environmental Field Services Manager	0.4	\$26,364
	Sanitarian	2.0	\$114,951



<b><u>Functional Unit</u></b>	<b><u>Classification</u></b>	<b><u>#FTE</u></b>	<b><u>Salary</u></b>
<b>(continued)</b>			
Environmental Protection	Environmental Field Services Manager	0.4	\$26,364
Environmental Protection (continued)	Sanitarian	1.5	\$87,108
Institutional Sanitation and Safety	Environmental Field Services Manager	0.2	\$13,182
	Sanitarian	1.5	\$87,108
Injury Prevention/Public Health Emergency Preparedness	Injury Prevention Services Manager	1.0	\$64,688
	Community Health Specialist	2.0	\$108,946
	<b>Totals</b>	<b>36.5</b>	

**CITY OF ALLENTOWN  
BUREAU OF HEALTH  
ORGANIZATION OF PERSONNEL  
2020**



# **Part 2**

# **Fiscal Management**

**LOCAL HEALTH DEPARTMENT BUDGET & EXPENDITURE**  
Acts 315, 12, PA Code: Title 28, Chapter 15

2020 Budget X Expenditure\_\_\_  
ALLENTOWN/LEHIGH COUNTY

(1)	(2)	(3)	(4)	(5)	(6)
Program Description	Total Funds	Exclusions Grants, Etc.	Subsidy Base	Act 12 Funds	Act 315 Funds
Administration *	2,110,912		2,110,912		2,110,912
<b>TOTAL Administration (Sec 15.12)</b>	<b>2,110,912</b>		<b>2,110,912</b>		<b>2,110,912</b>
Child/Family Health	575,818	306,143	269,675		269,675
Communicable Disease	986,818	635,732	351,086		351,086
Chronic Disease Control	552,906	133,372	419,534		419,534
<b>TOTAL Personal Health (Sec 15.13)</b>	<b>2,115,542</b>	<b>1,075,247</b>	<b>1,040,295</b>		<b>1,040,295</b>
Injury Prevention	466,343	278,748	187,595	12,670	174,925
Food Protection	248,653		248,653	16,794	231,859
Environmental Protection	197,203		197,203	13,319	183,884
Institution Sanitation and Safety	166,672		166,672	11,257	155,415
<b>TOTAL Environmental Health (Sec 15.14)</b>	<b>1,078,871</b>	<b>278,748</b>	<b>800,123</b>	<b>54,040</b>	<b>746,084</b>
<b>TOTAL: Administration</b>	<b>2,110,912</b>		<b>2,110,912</b>		<b>2,110,912</b>
<b>TOTAL: Personal Health</b>	<b>2,115,542</b>	<b>1,075,247</b>	<b>1,040,295</b>		<b>1,040,295</b>
<b>TOTAL: Environmental Health</b>	<b>1,078,871</b>	<b>278,748</b>	<b>800,123</b>	<b>54,040</b>	<b>746,083</b>
<b>SUM: Qualifying Health Program</b>	<b>5,305,325</b>	<b>1,353,995</b>	<b>3,951,330</b>	<b>54,040</b>	<b>3,897,290</b>
<b>SUM: Local Health Dept. Program</b>	<b>5,305,325</b>	<b>1,353,995</b>	<b>3,951,330</b>	<b>54,040</b>	<b>3,897,290</b>
Analysis by Vicky Kistler	Position Director of Health	Agency Allentown Health Bureau		Date Feb 24, 2020	

Notes:

\* Includes indirect administrative cost center allocations of \$1,166,240 (information systems, communications, fleet vehicle purchase and maintenance, HR services, AP/AR, et.al.).

**LOCAL HEALTH DEPARTMENT BUDGET & EXPENDITURE**  
Acts 315, 12, PA Code: Title 28, Chapter 15

2019 Budget\_ Expenditure X  
ALLENTOWN/LEHIGH COUNTY

(1)	(2)	(3)	(4)	(5)	(6)
Program Description	Total Funds	Exclusions Grants, Etc.	Subsidy Base	Act 12 Funds	Act 315 Funds
Administration *	1,915,180		1,915,180		1,915,180
<b>TOTAL Administration (Sec 15.12)</b>	<b>1,915,180</b>		<b>1,915,180</b>		<b>1,915,180</b>
Child/Family Health	555,446	260,673	294,773		294,773
Communicable Disease	890,279	567,327	322,952		322,952
Chronic Disease Control	753,485	130,441	443,044		443,044
<b>TOTAL Personal Health (Sec 15.13)</b>	<b>2,019,210</b>	<b>958,441</b>	<b>1,060,769</b>		<b>1,060,769</b>
Injury Prevention	316,807	255,764	61,043	5,695	55,348
Food Protection	201,094		201,094	18,762	182,332
Environmental Protection	170,044		170,044	15,865	154,179
Institution Sanitation and Safety	147,030		147,030	13,718	133,312
<b>TOTAL Environmental Health (Sec 15.14)</b>	<b>834,975</b>	<b>255,764</b>	<b>579,211</b>	<b>54,040</b>	<b>525,171</b>
<b>TOTAL: Administration</b>	<b>1,915,180</b>		<b>1,915,180</b>		<b>1,915,180</b>
<b>TOTAL: Personal Health</b>	<b>2,019,210</b>	<b>958,441</b>	<b>1,060,769</b>		<b>1,060,769</b>
<b>TOTAL: Environmental Health</b>	<b>834,975</b>	<b>255,764</b>	<b>579,211</b>	<b>54,040</b>	<b>525,171</b>
<b>SUM: Qualifying Health Program</b>	<b>4,769,365</b>	<b>1,214,205</b>	<b>3,555,160</b>	<b>54,040</b>	<b>3,501,120</b>
<b>SUM: Local Health Dept. Program</b>	<b>4,769,365</b>	<b>1,214,205</b>	<b>3,555,160</b>	<b>54,040</b>	<b>3,501,120</b>
<u>Analysis by</u> Vicky Kistler	<u>Position</u> Director of Health	<u>Agency</u> Allentown Health Bureau	<u>Date</u> Feb 24, 2020		

Notes:

\* Includes indirect administrative cost center allocations of \$1,057,151 (information systems, communications, fleet vehicle purchase and maintenance, HR services, AP/AR, et.al.).

## ALLENTOWN HEALTH BUREAU

### BUDGET BY UNIT

2020

<b><u>BUDGET BY UNIT - FY 2020</u></b>	<b><u>BUDGET TOTAL</u></b>	<b><u>PERCENT</u></b>
Administration & Support Services	\$2,110,912	39.8%
Personal Health Services	\$2,115,542	39.9%
Environmental Health Services	\$1,078,871	20.3%
<b>GRAND TOTAL</b>	<b>\$5,305,325</b>	<b>100%</b>

### ESTIMATED REVENUE BY SOURCE FOR YEAR 2020

<b>Budget by Unit</b>	<b>Budget Total</b>	<b>Percent</b>
Grants - Federal	\$1,710,486	32.2%
Grants - State	\$251,050	4.7%
State Reimbursement (Act 315)	\$606,000	11.4%
State Reimbursement (Act 12)	\$54,040	1.0%
Fees, Licenses and Services	\$390,880	7.4%
Local Allotment*	\$2,292,869	43.3%
<b>Grand Total:</b>	<b>\$5,305,325</b>	<b>100%</b>

\*Includes General Fund, service fees, private grants and Administrative cost allocations.

# ALLENTOWN HEALTH BUREAU

## BUDGET BY UNIT

2019

<u>BUDGET BY UNIT</u> <u>FY - 2019</u>	<u>BUDGET TOTAL</u>	<u>%</u>	<u>EXPENDITURE</u> <u>TOTAL</u>	<u>DIFFERENCE</u>
Administration & Support Services	\$2,126,569	40.7%	\$1,915,180	\$211,389
Personal Health Services	\$2,142,459	41.0%	\$2,019,210	\$123,249
Environmental Health Services	\$956,798	18.3%	\$834,975	\$121,823
<b>GRAND TOTAL</b>	<b>\$5,225,826</b>	<b>100%</b>	<b>\$4,769,365</b>	<b>\$456,461</b>

## ACTUAL REVENUE BY SOURCE FOR YEAR 2019

<b>Budget by Unit</b>	<b>Budget Total</b>	<b>%</b>
Grants – Federal	\$1,022,602	21.4%
Grants - State	\$232,394	4.9%
State Reimbursement (Act 315)**	\$614,751	12.9%
State Reimbursement (Act 12)**	\$54,040	1.1%
Fees, Licenses and Services	\$483,806	10.2%
Local Allotment*	\$2,361,772	49.5%
<b>Grand Total:</b>	<b>\$4,769,365</b>	<b>100%</b>

\*Includes General Fund, service fees, private grants and Administrative cost allocation.

**CITY OF ALLENTOWN  
BUREAU OF HEALTH**

**2020 BUDGET**  
**LOCAL - STATE - FEDERAL FUNDS**

	<b>Administration and Support</b>	<b>Personal Health</b>	<b>Environmental Health</b>	<b>Total</b>
Personnel - Salary and Benefits	\$1,629,735	\$1,918,746	\$874,058	<b>\$4,422,539</b>
Operation	\$458,003	\$194,296	\$204,013	<b>\$856,312</b>
Equipment	\$23,174	\$2,500	\$800	<b>\$26,474</b>
<b>GRAND TOTAL</b>	<b>2,110,912</b>	<b>\$2,115,542</b>	<b>\$1,078,871</b>	<b>\$5,305,325</b>

**2019 BUDGET**  
**LOCAL - STATE - FEDERAL FUNDS**

	<b>Administration and Support</b>	<b>Personal Health</b>	<b>Environmental Health</b>	<b>Total</b>
Personnel - Salary and Benefits	\$1,612,796	\$1,869,989	\$868,257	<b>\$4,351,042</b>
Operation	\$506,067	\$249,047	\$87,741	<b>\$842,854</b>
Equipment	\$7,707	\$23,423	\$800	<b>\$31,930</b>
<b>GRAND TOTAL</b>	<b>\$2,216,569</b>	<b>\$2,142,459</b>	<b>\$956,798</b>	<b>\$5,225,826</b>



**CITY OF ALLENTOWN  
BUREAU OF HEALTH**

**CATEGORICAL HEALTH GRANT CONTRACTS – 2020**

<b>CONTRACT</b>	<b>FEDERAL/ STATE</b>	<b>TERM OF CONTRACT</b>	<b>AMOUNT</b>
Safe & Healthy Communities SAP #4100077241	100% Federal	July 1, 2017 – June 30, 2020	\$824,930
HIV/AIDS Education and Prevention #4100079935	36.5% Federal 63.5% State	Jan. 1, 2018 – July 31, 2021	\$1,100,000
Public Health Emergency Preparedness #4100077907	100% Federal	July 1, 2019 – June 30, 2020	\$249,632
Immunization #4100079839	100% Federal	July 1, 2019 – June 30, 2020	\$113,041
Title V – Maternal Child Health #4100080468	100% Federal	July 1, 2018 – June 30, 2021	\$449,337
Safe & Healthy Homes Project #4100073550	100% Federal	July 1, 2019 – June 30, 2020	\$150,000
Tuberculosis #4100079217	100% State	July 1, 2018 – June 30, 2020	\$32,200
Child Lead Poisoning Prevention SAP#4100082847	100% Federal	July 1, 2019 – June 30, 2020	\$43,323

# **Part 3**

## **Program Plans**

## **INTRODUCTION**

The City of Allentown is the third largest city in Pennsylvania and is a core city of the third largest urbanized area in the state. It is located 50 miles northwest of Philadelphia and 80 miles southwest of New York City. Allentown has similar challenges of other cities including poverty, education, health and social service needs.

Allentown has an area of approximately 17 square miles. The July 1, 2018 population estimate of the City is 121,433. The demographic breakdown is: 59.1% White alone, 14.2% Black or African American alone, 0.8% American Indian and Alaska Native alone, 2.5% Asian alone, 0.1% Native Hawaiian and Other Pacific Islander alone, 4.8% Two or More Races, 52.2% Hispanic or Latino, 33.0% White alone, not Hispanic or Latino (source: U.S. Census Bureau, Allentown city, PA, Population estimates, July 1, 2018).

The Allentown Health Bureau (AHB) was established on January 1, 1980. The Health Bureau's mission is to prevent disease and injury and to protect and promote the public's health. The Health Bureau derives its authority to function as a local health department from Act 315, the Local Health Administration Law, and is comprised of Environmental Health and Personal Health sections which provide population-based public health services and prevention programs.

For the past decade, staff of the Allentown Health Bureau has engaged in long-term planning to address both organizational capacity and the priority public health problems of City residents. To assess the health status of Allentonians, causes of premature deaths (before age 65) have been analyzed for over 40 years. In addition to premature mortality, the bureau utilized input from key community informants to devise its list of priority public health concerns.

The Allentown Health Bureau began the Continuous Quality Improvement (CQI) process in 2016. All staff were introduced to CQI in September, then AHB Leader and CQI Leader training sessions and one Kaizen event were conducted. The evaluation of Allentown Health Bureau's Strategic Plan 2017 – 2019, the Community Health Improvement Plan, and subsequent Kaizen events will be updated in 2020.

The Allentown Health Bureau will continue to use local community health data, in conjunction with the Healthy People 2020 National Health Objectives, to inform AHB CQI projects, strategic priorities, and programming where financially feasible. AHB programs address the enforcement of laws to protect the public's health, the prevention of chronic diseases, injuries, infectious diseases, and the promotion of healthy behaviors.

## **ADMINISTRATION AND SUPPORT SERVICES**

### **Overview**

The Administration and Support Services Staff, primarily comprised of departmental management, provides executive oversight in the development and implementation of public health programs in the City of Allentown. This section assures that all Bureau services are delivered in accordance with current standards of public health practice and with the intent of accomplishing the Healthy People 2020 Objectives at the local level. This section also reviews appropriate federal, state, and local health legislation for the City Administration. Included in support services are the Community Health Education Program and Laboratory Services. In addition, the Administration and Support Services Section oversees the personnel and fiscal management of the Bureau.

### **Program Goal:**

The goal of the Administration and Support Services Section is to assure that the **three core public health functions** are accomplished in the City of Allentown. These core functions are **assessment** of the population's health status; **development** of the public policies to maintain and promote health; and **assurance** that the population has access to public health services. The administration and support staff are also responsible to make sure that the **Bureau's mission** is continually pursued: **to prevent disease and injuries and to protect and promote the public's health.**

The administration program assures that the **Ten Essential Public Health Services** are provided in the City of Allentown:

- Monitor health status to identify and solve community health problems.
- Diagnose and investigate health problems and health hazards in the community.
- Inform, educate, and empower people about public health issues.
- Mobilize community partnerships and actions to identify and solve health problems.
- Enforce laws and regulations that protect health and ensure safety.
- Link people to needed personal health and personal health-care workforce.
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
- Develop policies and plans that support individual and community health efforts.
- Research for new insights and innovative solutions to health problems.
- Assure a competent public health and personal health care workforce.

## **2020 Administration and Support Services Objectives**

### **Objective 1**

Evaluate the performance of Allentown Health Bureau staff during 2020 with reference to the core competencies for public health workers; these competencies represent a set of skills, knowledge, and attitudes necessary for the practice of public health as identified by the Council on Linkages between Academia and Public Health Practice.

#### **Activities**

1. Assess the level to which each core competency is needed to perform the various jobs in the Health Bureau when job descriptions are reviewed. Competencies are divided into eight domains: Analytic/ Assessment, Policy Development/Program Planning, Communication, Cultural Competency, Community Dimensions of Practice, Basic Public Health Science, Financial Planning and Management, and Leadership and Systems Thinking.
2. Develop and implement an annual training plan for each individual staff member based on needs identified during performance evaluations and training needs assessment. The training plan will address:
  - a) Skills, knowledge, and attitudes necessary for the competent performance of job duties.
  - b) Job category needs (clerical, professional staff, management, administration).
  - c) Time allocated to accomplish specified training (up to four hours per month).
3. Enhance training capacity to provide new staff with a better introduction to the concepts contained in the core public health competencies.
4. Complete targeted orientation and training guidance documents for each position in the Bureau to include timeframes, program specific activities and training resources.
5. Develop job specific performance measures for each staff person and review progress quarterly.
6. Continue to develop accurate job action sheets for public health emergency responses; these will be attached to each job description.

## **Objective 2**

Continue to evaluate all Bureau programs and operations and assure that they meet or exceed local, state and national public health standards during 2020.

### **Activities**

1. Revise personal health and environmental health procedures and protocols as needed to assure compliance with state and national standards of public health practices. Maintain evaluation measures to assure that the standards are consistently met.
2. Assess the degree to which the Allentown Health Bureau meets Local Public Health Department standards utilizing the definition of a functional local health department developed by The National Association of City and County Health Officials (NACCHO) and the metrics designed to measure performance.

## **Objective 3**

Seek to maintain the percentage of the Health Bureau's operating budget that is generated from sources other than the City's General Fund during 2020.

### **Activities**

1. Prepare and submit the 2020 Act 315/12 grant application by March 31, 2020.
2. Submit new and renewal grant applications to address public health concerns facing the City of Allentown with an emphasis on best practice models or demonstrated behavioral intervention programs.
3. Conduct an ongoing review of grant resource publications, including the Pennsylvania Bulletin [www.pabulletin.com](http://www.pabulletin.com) and Grants.gov [www.grants.gov](http://www.grants.gov), to identify grant opportunities that would help the Bureau meet public health objectives.
4. Assess grant opportunities offered through the PA Department of Health (PADOH), National Association of City and County Health Officials, Centers for Disease Control and Prevention, and other sources that are congruent with Allentown Health Bureau goals and objectives.
5. Implement third party billing for Clinical Services through partnership with local hospitals and a dedicated third-party billing vendor.
6. Develop and maintain partnerships with community agencies to avoid duplication of services and to reduce cost.

7. Collaborate with other City departments (Parks/Recreation, Planning, and DCED bureaus) to apply for grants that will provide a maximum benefit to the General Fund and will integrate public health goals into other areas of service.

#### **Objective 4**

Continue to enhance the Bureau's capacity to electronically communicate, analyze data and generate reports during 2020.

#### **Activities**

1. Continue to work with the City's Bureau of Information Systems and the Pennsylvania Department of Health's Network Connection to assure computers, software, databases, and internet applications are functioning properly.
2. Expand database capabilities in the areas of Public Health Emergency Preparedness, Communicable Disease Control, Maternal and Child Health, Chronic Disease Control, Environmental Field Services, and Injury Prevention.
3. Assure that Health Bureau program staff, managers, and administration receive available information and communication technologies training as needed.
4. Assure that an updated inventory of Health Bureau audiovisual and computer equipment, including licensed software in conjunction with the City of Allentown's Information Technology Department is maintained.
5. Maintain and utilize communications systems capacities to send Public Health Alerts to Physicians, Emergency Rooms, Laboratories and other groups (e.g., childcare providers) as needed, review and update recipient list quarterly.
6. Participate in the Pennsylvania Health Alert Network (PAHAN) through monitoring and posting alerts as needed.
7. Provide needed computer equipment and training for key staff to enable them to work from off-site locations, when necessary.
8. Maintain the capacity to work electronically from off-site locations.

## **Objective 5**

Maintain a directory of local, state and federal agencies that support activities of the Allentown Health Bureau during 2020.

### **Activities**

1. Update the referral directories used in both personal and environmental health programs to support program activities.
2. Update the Public Health Emergency Preparedness contact list on a periodic basis including community contacts such as local laboratory, hospital, media, PADOH and Emergency Management Agency numbers.

## **Objective 6**

Prepare and maintain population and capabilities-based initiatives required for AHB to achieve national certification and accreditation status.

### **Activities**

1. Review and update the City's all-hazards public health emergency response plan to meet the standards reflected in the Project Public Health Ready (PPHR) recertification process.
2. Initiate the process for AHB to obtain Public Health Accreditation through the Public Health Accreditation Board (PHAB).
3. Update AHB's 2017 – 2019 Strategic Plan and subsequent Kaizen events to address public health priorities in the City of Allentown.
4. Update AHB's Community Health Improvement Plan and implement the 2020 Continuous Quality Improvement Plan.

## **Objective 7**

In conjunction with the City Administration, ensure that the financial health of the Health Bureau is maintained at a level that will enable the provision of mandated public health services to the community.

### **Activities**

1. Complete the timely preparation and submission of monthly invoices to grantors, the accurate and timely billing of license fees to regulated facilities, and the appropriate billing information to the third-party billing service to ensure that the Health Bureau's various revenue streams are fulfilled to meet budgetary projections.



2. Monitor program performance and manage programs within budget constraints (e.g., continually monitor program expenditures) to identify the need for budgetary transfers to address potential shortfalls resulting from unanticipated, unbudgeted expenses.
3. Utilize appropriate budget processes such as cost-effectiveness, cost-benefit, and cost-utility analysis (e.g., review and alter fee schedules as appropriate) to develop and present an annual budget to the City administration.
4. Negotiate and develop contracts, letters of agreement, and memoranda of understanding for the provision of population-based services by public health partners to the community.
5. Maintain an in-house financial record system of reports which can be reconciled on a monthly basis with the financial records maintained by the City's Finance Department in order to identify errors in the posting of receipts and enable the completion of an annual audit.

**Program Evaluation:**

Conduct a quarterly review of the 2020 program plans to assure that substantial progress is being made in accomplishing stated objectives. All public health program operations and budget requirements shall be met by December 31, 2020.

## **COMMUNITY HEALTH EDUCATION PROGRAM**

Community Health Education is integrated into all personal and environmental health programs. Each program has specific health education objectives that relate to its target population(s) and enable individuals, families, and the community to play an active role in preventing and reducing diseases and injuries, while promoting healthy behaviors. During 2020, the AHB will continue to conduct general community health education activities, as well as targeted public health campaigns related to priority health problems in Allentown.

### **2020 Community Health Education Program Objective**

#### **Objective 8**

Continue to implement health education activities, including public presentations, in all programs within the Health Bureau.

#### **Activities**

1. Design, implement and evaluate educational activities that enable individuals, groups, and the community to play an active role in improving, protecting, and maintaining health.
2. Schedule health education presentations on relevant public health issues with community organizations, professional groups, and the media.
3. Promote public health education campaigns related to identify priority initiatives via special media campaigns, educational sessions, and events.
4. Promote public health messages and programming through the use of the City's website and social media sites when feasible.

#### **Program Evaluation:**

At least one public health education event involving community groups and the media will occur each month during 2020.

## **2020 Laboratory Services Objective**

### **Objective 9**

Maintain an effective laboratory services system including proficient on-site laboratory testing during 2020.

#### **Activities**

1. Comply with the Clinical Laboratory Improvement Act and State guidelines to maintain necessary licensure by the Bureau of Laboratories, PADOH and the U.S. Department of Health and Human Services.
2. Routinely perform control testing and have equipment calibrated as necessary.
3. Perform satisfactorily on proficiency tests.
4. Monitor and record refrigeration temperatures to ensure vaccine quality.
5. Maintain an inventory of laboratory services available in the community to support public health programming.
6. Review and revise the Laboratory Procedure Manual as necessary.
8. Maintain laboratory equipment including vaccine refrigeration systems and the universal power source to assure vaccine integrity.

#### **Program Evaluation:**

Review policies to determine compliance with the Clinical Laboratory Improvement Act and Pennsylvania Bureau of Laboratories. Review proficiency test logs and quality assurance system quarterly during 2020.

**2019  
Administrative  
and  
Support Services  
Accomplishments**

## **ADMINISTRATIVE AND SUPPORT SERVICES**

### **2019 PERFORMANCE REVIEW: ACCOMPLISHMENTS BY OBJECTIVE**

The Allentown Health Bureau's 2019 Program Plans contained 73 specific and measurable public health objectives to improve the health of Allentonians. Of the 73 objectives in last year's plan 69 were completely achieved, and four were partially achieved.

#### **Administration and Support Services Section**

##### **Objective 1 – Achieved**

Evaluate the performance of Allentown Health Bureau staff during 2019 with reference to the core competencies for public health workers. The core competencies represent a set of skills, knowledge, and attitudes necessary for the practice of public health as identified by the Council on Linkages between Academia and Public Health Practice.

- Professional development plans for staff were reviewed and training opportunities sought.
- AHB orientation and training documents updated and completed by new staff members.
- Implemented the functional roles, outlined in AHB's Emergency Plan, as part of our response to Influenza surveillance and community vaccination clinics.
- All staff completed assigned Public Health courses and training needed to conduct their job responsibilities.

##### **Objective 2 - Achieved**

Continue to evaluate all Bureau programs and operations and assure that they meet or exceed state and national public health standards during 2019.

- Maintained a system of records management that is consistent with the State's municipal records management manual.
- Reviewed and revised, as necessary, the job descriptions of Health Bureau personnel.
- Reviewed and updated programmatic and personal health policies and procedures.
- Conducted quarterly progress evaluations of each program's annual objectives and activities.

### **Objective 3 - Achieved**

Seek to maintain the percentage of the AHB's operating budget that is generated from sources other than the City's General Fund during 2019.

- Bureau staff prepared and submitted the 2019 Act 315/12 grant application on March 28, 2019.
- Reviewed grant opportunities that were congruent with AHB goals and objectives.
- Revenue sources other than the General Fund represented approximately 51.5% of the Health Bureau's public health programs' total expenditures.
- Bureau staff prepared letters of intent, budgets, and/or grant applications in the following program areas:

Community Development Block Grant (CDBG)

Immunization – PA DOH

Injury Prevention: (LC C&Y)

Lead: PA DOH

Safe and Healthy Communities

Safe and Healthy Homes: PA DOH

STD/Safer Sex & MCH Services: (LC D&A)

Public Health Emergency Preparedness (PHEP): PA DOH

PHEP, Opioid Funding SAF: PA DOH

### **Objective 4-- Achieved**

Continue to enhance the Bureau's capacity to electronically communicate, analyze data and generate reports during 2019.

- During 2019, the Bureau worked with the City's Bureau of Information Systems and the PADOH to assure that computers and software and internet applications functioned properly.
- The PA National Electronic Data Surveillance System (PA NEDSS) was utilized for communicable disease, elevated blood lead levels, Tuberculosis, and HIV investigations.
- The City's EDEN accounting and ADMINS data collection systems continued to be utilized for financial records and environmental program data analysis, respectively. *PAFoodSafety* software was utilized in the food service program.
- Utilized social media to promote public health campaigns and to raise awareness about public health topics related to nutrition, injury prevention, preparedness and other areas.
- Local broadcast e-mail systems were updated to communicate Public Health Alerts to medical providers and laboratories as needed.
- Maintained computer-based staff-training log with reporting capacity.
- Staff completed database training: PANEDSS database – TB, and communicable disease data, Statewide Immunization Information System

database (SIIS) – Immunization data, and, PA Food Safety – food service inspection data, HIV Surveillance, HIV Navigation, HIV Data-2-Care and SERVPA – volunteer registration data.

- Public health database (PA Food Safety, SIIS, PA NEDSS, PA Health Alert Network (PA HAN), GIS and ACCESS) concerns were addressed on a continual basis.
- Monitored the PA Health Alert Network (PA HAN) and shared alerts as appropriate.
- Key staff have the capacity (computer and training) to work from off-site locations as needed through computer equipment.
- Maintained links on City website to facilitate public access and download capacity for selected environmental health and injury prevention applications and guidelines.
- Updated links on the City's Webpage for to promote AHB Flu Clinics, Allentown Volunteer Medical Reserve Corps, Million Clicks for a Million Hearts, a Prescription Drug Abuse prevention message, Healthy Kids Healthy Allentown initiative in conjunction with the City's web manager.
- The Allentown Health Bureau's Facebook Page was used to promote public health messages and initiatives such as Million Hearts.
- AHB Administered the ScheduleME Online Registration System for the Lehigh Valley Health Network Drive-Thru Flu Clinics held in November. AHB entered the LVHN 2-day free flu clinics into the ScheduleME system which enabled individuals to use the online system to reserve an appointment time to receive a free flu vaccine at Dorney Park and Wild Water Kingdom on Saturday, November 9<sup>th</sup> or Coca-Cola-Park on Sunday, November 10<sup>th</sup>. The ScheduleME system enabled AHB to monitor the number of registrations, respond to problems and inquiries from individuals utilizing the system, and provide reports/update on the registration status Health Bureau administration and LVHN Infection Control.

### **Objective 5 - Achieved**

Maintain a directory of local, state, and national resources which support Health Bureau programs and services during 2019.

- Each program maintains referral directories to support its program services.
- AHB utilizes the PA 2-1-1 service to find and connect individuals to community resources.
- Various emergency contact lists, both internal and inter-agency, were updated on a regular basis.
- The Public Health Emergency Preparedness contact list is updated on a periodic basis.

## **Objective 6 - Partially Achieved**

Prepare and maintain population and capabilities-based initiatives required for AHB to achieve national certification and accreditation status.

- AHB continued to review, implement, and update elements of Project Public Health Ready.
- The City's all-hazards public health emergency response plan, to meet the standards reflected in the Project Public Health Ready (PPHR) recertification process, was reviewed and updated.
- AHB explored the process for obtaining Public Health Accreditation through the Public Health Accreditation Board (PHAB).
- AHB implemented the strategic plan to address public health priorities in the City of Allentown.
- AHB continued the Continuous Quality Improvement process, the Annual Improvement plan, and conducted a Kaizen event related to the inventory and storage of PHEP supplies at an off-site location
- During 2019 AHB staff addressed the following CQI projects:
  1. Increase value –productivity by eliminating waste
  2. Community based nutrition and physical activity
  3. External Marketing
  4. Secure non-traditional funding sources
  5. Syphilis testing and billing
  6. Million Clicks for Millions Hearts
  7. Communications
- During 2018, AHB staff addressed the following CQI projects:
  1. Job Time Study
  2. Social Determinants of Health
  3. Safe and Healthy Homes Data
  4. Feeding our Youth
  5. CQI Training
  6. Continuous Quality Improvement (ongoing)
- During 2019, AHB staff addressed the following CQI projects:
  1. Social Determinants of Health (ongoing)
  2. Million Clicks (ongoing)
  3. Feeding our Youth (ongoing)
  4. Continuous Quality Improvement (ongoing)
- AHB continues to participate in local community health workgroups that were developed in response to the assessment that was conducted by the three Allentown Hospitals.



### **Objective 7 - Partially Achieved**

In conjunction with the City Administration, ensure that the financial health of the Health Bureau is maintained at a level that will enable the provision of mandated public health services to the community.

- AHB staff prepared and submitted monthly invoices to grantors and billed license fees to regulated facilities to ensure that the various revenue streams were fulfilled to meet budget projections.
- Third party billing implementation ideas were discussed in 2019.
- Utilized budget processes to develop and present an annual budget to the City of Allentown administration.
- Developed and negotiated contracts and agreements for the provision of population-based health services by public health partners in the community i.e. Community Bike Works, LVHN, and SLUHN.
- Maintained in-house financial record system of reports which were reconciled on a monthly basis with City financial records in preparation for the completion of an annual audit.

### **Community Health Education**

#### **Objective 8 - Achieved**

Continue to implement health education activities in all programs within the Health Bureau.

- Health education activities for various populations and target audiences are reported in each program section.

### **Laboratory Services**

#### **Objective 9 - Achieved**

Maintain an effective laboratory services system including proficient on-site laboratory testing during 2019.

- The Bureau's lab complied with CLIA and State guidelines and maintained its licensure by the Bureau of Laboratories, Pennsylvania Department of Health and the Department of Health and Human Services. (CLIA ID# 39D0692389)
- Routinely performed proficiency testing and calibrated equipment as necessary.
- Performed acceptably on American Proficiency Institute quarterly tests.
- Medical Advisor observed Allentown Health Bureau staff as they conducted proficiency testing to assure proper technique was utilized.

- Continued to track patients' laboratory tests by date collected, analyzed, and result received.
- The electronic monitoring and alarm system equipment for the vaccine refrigerator and freezer was maintained along with a daily vaccine temperature log.
- During 2019, the new Sensaphone alarm system, which uses internet-based technology, was installed.
- The DC Uninterrupted Power Source was operational and provides electricity in the event of AC power loss.
- Maintained an inventory of laboratory services available in the community to support public health programming. (See Chart 9.1)

**CHART 9.1**

**BUREAU OF HEALTH**

**AVAILABLE LABORATORY SERVICES**

<b>Laboratory</b>	<b>Public</b>	<b>Private</b>	<b>Personal Health Services</b>	<b>Environmental Health Services</b>	<b>Laboratory Services</b>
Allentown Health Bureau	X		X		Wet mounts, dipstick UA, pregnancy screening, and capillary blood lead tests.
Environmental Hazard Services		X			Lead environmental samples: dust, soil and paint chips.
Health Network Laboratory		X	X		Herpes cultures, Hepatitis A, Hepatitis B and Hepatitis C tests, HCV Viral Loads, CD4/CD8 Profile, HIV Antibody Profile, Syphilis, QuantiFERON – TB Gold tests, Bilirubin Total, Alk Phos Total and AST (SGOT) tests, Blood Lead, CAT Scans, Pap, and HPV tests.
St. Luke's University Health Network(SLUHN) - SHH Laboratory		X	X		Lipid profiles, glucose blood tests, Pap tests, QuantiFERON – TB Gold tests, Bilirubin Total, Alk Phos Total and AST (SGOT) and HPV tests.
SLUHN - SHH Radiology		X	X		Performs chest x-rays, CAT Scans, mammograms, breast ultrasounds.
St. Luke's University Health Network – Allentown Campus		X	X		Performs chest x-rays, CAT Scans, mammograms, breast ultrasounds, Pap tests, Bilirubin Total, Alk Phos Total and AST (SGOT) tests.
Lehigh County Penn State Agricultural Extension Office		X		X	Entomological identification.
CDD Laboratory		X			Syphilis, HIV 4 <sup>th</sup> generation, HIV Viral Load, CD4 tests and Chlamydia and Gonorrhea cultures.

**CHART 9.1**

**BUREAU OF HEALTH**

**AVAILABLE LABORATORY SERVICES**

<b>Laboratory</b>	<b>Public</b>	<b>Private</b>	<b>Personal Health Services</b>	<b>Environmental Health Services</b>	<b>Laboratory Services</b>
PA Department of Agriculture Laboratory	X			X	Unknown contamination of food from retail operators, canned food chemical and microbiological analysis, examination of animal rabies specimens.
PA Department of Health, Bureau of Labs, Exton, PA	X		X	X	Examination of animal rabies specimens, sputum samples for AFB smear and cultures. Biological/Chemical analysis of BT agents via law enforcement chain of custody protocol.
US Food & Drug Administration, Philadelphia, PA	X			X	Physical, chemical and microbiological analysis of manufactured food products in interstate commerce.
Contract Laboratory	X			X	Stream and pollution incident samples for inorganic and organic chemical analysis; drinking water sampling; required bathing place coliform sampling.
Oxford Diagnostic Laboratories		X	X		Performs T-SPOT, TB tests.

**2020**  
**Personal Health**  
**Services**  
**Program Plans**

## **CHRONIC DISEASE CONTROL**

### **Overview**

**Chronic diseases**, such as heart disease, cancer, stroke and diabetes, are among the leading causes of death and disability in the United States. According to the Centers for Disease Control and Prevention (CDC), chronic diseases are among the most prevalent, costly, and preventable of all health problems. While heart disease and cancer remain the top two causes of death and combined accounted for 44.3% of all deaths in 2017, the rates for heart disease and cancer deaths continue on a gradual but consistent decreasing trend since 1993<sup>1</sup>. The actual underlying causes of these deaths are often risk factors that could have been prevented. A few modifiable risk behaviors, alone or in concert, bring inordinate suffering and early death to millions of Americans. Obesity and behaviors such as poor nutrition, physical inactivity, tobacco use and excessive alcohol consumption are major contributors to cardiovascular disease and cancer, our nation's leading killers. These behaviors also exacerbate the devastating complications of diabetes. (<sup>1</sup>Source: Kochanek KD, Murphy SL, Xu JQ, Arias E. Deaths: Final data for 2017. National Vital Statistics Reports; vol 68 no 9.–Hyattsville, MD: National Center for Health Statistics. 2019.)

The City of Allentown Bureau of Health continues to address heart disease and cancer as the top two causes of premature death in Allentown.

Chronic diseases are addressed in two components:

1. Nutrition and Physical Activity Program
  - Cardiovascular disease
  - Diabetes
  - Obesity
2. Cancer Prevention and Control Program
  - Cancer education and screening

**Cardiovascular disease** is the leading cause of death and disability in the nation. According to the CDC (2017), 647,457 people died of heart disease in the United States, which is 23% of all deaths. Several lifestyle factors can put people at a higher risk for developing heart disease. These include high blood pressure, high blood cholesterol, smoking, obesity, physical inactivity, and unidentified or poorly controlled diabetes. The Nutrition and Physical Activity Program offers cardiovascular risk factor screening for adults, nutrition and lifestyle counseling for adults and youth, access to nutritious meals for youth, as well as advocates for policy and environmental changes in the community to support good nutrition and physical activity.

**Diabetes** is the seventh leading cause of death in the United States. According to the CDC (2017), 83,564 or 3% of all deaths were attributed to diabetes. It affects 30.3 million people or 9.4% of the population. 23.8% of people with diabetes are undiagnosed (National Diabetes Statistics Report, 2017). In addition, an estimated 84.1 million (34%) of U.S. adults have prediabetes, a condition in which blood sugar levels are higher than normal, but not high enough to be considered diabetes (National Diabetes Statistics Report, 2017). Prediabetes raises a person's risk of type 2 diabetes, heart disease and stroke. Overall, the risk of death among people with diabetes is about twice that of people of similar age but without diabetes. Among school-aged children, diabetes is one of the most common diseases. In 2018, about 193,000 young people in the US under age 20 had diabetes (American Diabetes Association). Diabetes-related complications include blindness, kidney disease and nerve disease. Lifestyle change has been proven effective in reducing the incidence of diabetes and risk of complications resulting from diabetes. The Nutrition and Physical Activity Program includes diabetes screening for adults, nutrition and lifestyle counseling for adults and youth, as well as advocating for policy and environmental changes in the community.

**Obesity** rates doubled for adults and tripled for children between 1980 and 2008. As of 2015-2016, 39.8% of US adults are obese (National Health and Nutrition Examination Survey (NHANES) 2015-2016). Obesity among our nation's young people, aged 2 to 19 years was 18.5% in 2015-2016. The prevalence of obesity among adolescents aged 12-19 years (20.6%) and school-aged children 6-11 years (18.4%) was higher than among preschool-aged children 2-5 years (13.9%) (National Health and Nutrition Examination Survey (NHANES) 2015-2016). Obesity increases the risk of coronary heart disease, stroke, hypertension, type 2 diabetes, some cancers, liver and gallbladder disease, sleep apnea, osteoarthritis, infertility and mental health issues. Healthy lifestyle habits including healthy eating and physical activity can lower the risk of becoming obese and developing related diseases. The Nutrition and Physical Activity Program has formed strong partnerships with other city departments, the school district and the community to develop a plethora of robust program and policy initiatives and changes in our built environment which strongly support increased physical activity and good nutrition as lifestyle choices for our youth and families.

**Cancer**, the second leading cause of death, decreased 2.1% between 2016 and 2017<sup>1</sup>. Monitoring mortality trends is the best indicator in the progress against cancer. Since 1990, the death rate from all cancers combined showed a gradual and consistent downward trend among both men and women, all major racial and ethnic groups, and four of the leading causes of cancer deaths (prostate, female breast, lung, and colorectal)<sup>2</sup>. However, more progress is needed to detect early stage breast, cervical and colorectal cancers as trends demonstrate that screening rates for these three cancers have been flat or declining in recent years<sup>2</sup>. Recognizing the role of primary prevention, and advances in early detection and treatment in the reduction of incidence and mortality rates, the Cancer Prevention Program coordinates strategies to address those cancers that are preventable and/or more successfully treated if detected early. The Cancer Prevention and Control Program, in conjunction with Lehigh Valley Health Network, St. Luke's Hospital - Allentown Campus, St. Luke's Hospital - Sacred Heart

Campus, Star Wellness, and other community partners focuses on cancer prevention, education, early detection and assuring that affordable and accessible cancer screenings are available to medically underserved individuals in our community. (Source: *Cancer Trends Progress Report*, National Cancer Institute, NIH, DHHS, Bethesda, MD, February 2019, <http://progressreport.cancer.gov>.)

### **Program Goals:**

Decrease chronic diseases by collaborating with community partners to support environmental and policy changes that promote healthful behaviors and assure access to screening for the identification of chronic diseases that are preventable or more successfully treated if detected early.

## **2020 Chronic Disease Control Program Objectives**

### **Objective 10**

Provide screenings/assessments for individuals in the community to assure that all individuals regardless of insurance and socioeconomic status have access to heart disease, diabetes and cancer screenings according to national guidelines.

### **Activities**

#### **1. Heart Disease and Diabetes**

- a. Conduct cholesterol, glucose and blood pressure screening for 75 program participants.
- b. Offer individual dietary/lifestyle counseling session(s) for participants with abnormal glucose and/or lipid levels.

#### **2. Cancer**

In conjunction with Lehigh Valley Health Network, St. Luke's University Health Network and Star Wellness provide cancer screenings and information on available services to uninsured / underinsured individuals.

- a. Provide free breast cancer screenings and/or breast diagnostic testing to uninsured/underinsured women 40 years of age and older and women under 40 years of age as recommended by a healthcare provider:
  1. a minimum of 300 free clinical breast examinations;
  2. a minimum of 550 free mammograms with radiology interpretation;
  3. appointments for free breast ultrasounds when the clinical and/or mammography findings recommend that an ultrasound be performed; and



4. appointments at the surgical clinic and/or financial counselor, as needed, when the clinical and/or mammography findings recommend that a biopsy be performed.
  5. In addition, provide clinical breast examinations, mammograms and breast ultrasounds to uninsured/underinsured males on an as needed basis.
- b. Provide free gynecologic cancer screenings, including Pap test and pelvic examination, to 500 uninsured/underinsured women 21 years of age and older.

### **Objective 11**

Conduct community awareness initiatives and/or campaigns to reduce chronic disease incidence and mortality.

#### **Activities**

1. Collaborate with community partners to implement initiatives that coincide with state and nationally recognized health awareness campaigns.

### **Objective 12**

Educate the community on methods to reduce chronic disease risk factors (e.g., nutrition, physical activity and other lifestyle changes).

#### **Activities**

1. Conduct or participate in a minimum of 15 chronic disease risk reduction presentations/events.
2. Implement strategies to decrease the problem of overweight youth in the City of Allentown.
  - a. Offer weight loss counseling services to a minimum of 20 adolescents at school, home and community sites.
  - b. Conduct a month-long summer recreation program for approximately 150 center-city children.
  - c. Participate as active members of various committees/coalitions focused on youth (i.e. Allentown Community Garden Coalition, Healthy Kids Healthy Allentown, Lehigh Valley Food Policy Council, School Advisory Boards, etc.).

### **Objective 13**

Implement policy, environment, and systems changes that support healthy eating and increased physical activity.

### **Activities**

1. Network with city officials, schools, and or community organizations on efforts that foster safe walking, biking or free play.
2. Increase access to fresh, local produce and other foods in the community through community gardens, fruit and veggie mobile, farm market programs, and other related initiatives.
3. Decrease food insecurity and hunger through participation in federal nutrition programs and other related initiatives.
4. Support food recovery efforts in schools and the community to foster a healthy food economy.
5. Continue initiatives such as Million Clicks for Million Hearts that support physical activity and impact other risk factors for chronic diseases in Allentown.
6. Participate in state and national phone conferences and webinars related to nutrition and physical activity.

### **Objective 14**

Promote cancer prevention and screening messages to reduce cancer incidence and mortality.

### **Activities**

1. Conduct individual education with all individuals enrolled in the mammography program to stress the importance of adopting healthy behaviors and adhering to screening recommendations for cancer prevention and early detection.
2. Collaborate with cancer control partners to plan and implement cancer prevention, early detection and awareness through education, outreach and marketing initiatives in the Lehigh Valley.

### **Objective 15**

Monitor chronic disease morbidity and mortality.

### **Activities**

1. Compile national, state and local cancer and heart disease data and review trends.

2. Compile national, state and local/regional overweight and obesity rates for adults and youth and review trends.
3. Compile data to analyze utilization of the breast and cervical cancer program services.

### **Objective 16**

Maintain current certifications and licenses and assure staff knowledge of current public health issues and practices.

### **Activities**

1. Inform staff about relevant educational, training and professional development opportunities.
2. Assure that the training log reflects individual staff members' participation in certification programs, public health core competency training sessions, public health emergency preparedness trainings and drills.

### **Program Evaluation:**

The Chronic Disease Control Programs will be evaluated through quarterly assessments of program activities. In addition, the Chronic Disease Control Programs will submit reports to the Pennsylvania Department of Health and other grant funders as required. All activities will be completed by December 31, 2020.

## **COMMUNICABLE DISEASE PROGRAM**

### **Overview**

The Communicable Disease Program consists of the primary prevention and epidemiologic investigation of communicable disease and reportable conditions. Primary prevention includes community immunization and targeted education efforts. Epidemiology defines the occurrence of the disease, its clinical manifestations and management, characteristics of the affected population, the mechanisms of transmission, the characteristics of the causative agent, and identifies exposed individuals so that measures may be taken to prevent spread.

The Communicable Disease Program has six components:

- Communicable Disease Control and Surveillance
- Community Immunization
- Animal Bite Epidemiology
- Sexually Transmitted Disease Control
- HIV/AIDS Program
- Tuberculosis Control Program

The epidemiology of reportable conditions defines prevalence and incidence trends in the community. The analysis is used to assess at-risk populations and to target prevention, education, and treatment efforts.

The Communicable Disease investigation protocol is based on PA Code: Title 28 Chapter 27, Communicable/Noncommunicable Disease regulations, promulgated by the Commonwealth of Pennsylvania. The Pennsylvania Department of Health's Policy and Procedures Manual for the Identification, Investigation and Control of Reportable Diseases, the PA DOH Epidemiology Manual for the Identification, Investigation and Control of Infectious Diseases (2019), and the CDC's 2016 Nationally Notifiable Diseases and Conditions and Current Case Definitions are also used. Sexually Transmitted Disease prevention, investigation, and treatment activities are based on CDC's STD Treatment Guidelines (2015). Tuberculosis (TB) screening and treatment activities are conducted based on CDC's Targeted Tuberculin Testing and Treatment of Latent Tuberculosis Infection *MMWR* 2000; 49 (No. RR-6), Treatment of Tuberculosis *MMWR* 2003; 52 (No. RR-11), and Updated Guidelines for Using Interferon Gamma Release Assays to Detect *Mycobacterium tuberculosis* Infection – United States - 2010 *MMWR* 2010; 59 (No. RR-5); 1-25.

Communicable disease investigations that meet CDC's case definitions, are investigated with the National Electronic Data Surveillance System (NEDSS). Local Communicable Disease statistics are routinely analyzed to determine trends. Allentown Communicable Disease Surveillance Data are presented at quarterly hospital infection control meetings.

The Allentown Health Bureau continues to address HIV/AIDS as a health priority in Allentown. The goal is to implement risk-reduction activities in order to reduce the incidence of HIV infection, and to thereby decrease the years of potential life lost (deaths before the age of 65) among Allentown residents due to HIV infection. As directed by our State HIV Grant initiative we perform program operations for Partner services, HIV Navigation, and Data to care in our community. Partner services works to identify and test possible HIV contacts, Data to Care focusses on HIV positive individuals who have fallen out of care, and HIV Navigation engages high risk negatives in hopes of preventing the spread of the disease.

The HIV/AIDS Program focuses on 1) disease investigation and surveillance, 2) prevention education, 3) Counseling, Testing, and Referral services (CTR) and 4) Partner Services (PS). HIV education is provided to Allentown and Lehigh County residents through presentations and individual or small group risk reduction sessions. Groups targeted through evidence-based prevention education include: the general public, STD clients, men having sex with men (MSM), injection drug users, pregnant women, youth, minorities, and other clients. Confidential HIV counseling, testing, partner notification and referral services are offered in AHB Clinics, the community, and local colleges. AHB also conducts the Voices/Voces Safer Sex Intervention presentations at Lehigh County Drug and Alcohol facilities.

The Tuberculosis Control Program consists of disease surveillance, investigation and clinical diagnosis, treatment, and case-management of all reported active and latent Tuberculosis cases in the City of Allentown, as well as community education.

## **2020 Communicable Disease Program Objectives**

### **Objective 17**

All reports of communicable disease or reportable conditions in the City of Allentown will be epidemiologically investigated and appropriate control methods and interventions will be instituted in accordance with the Pennsylvania Department of Health's Policy and Procedures Manual for the Identification, Investigation and Control of Reportable Diseases (2019).

### **Activities**

1. Conduct epidemiological interviews of individuals with communicable disease and institute appropriate control measures (approximately 1610 per year).
2. Review disease surveillance data, on a daily basis, to promptly identify communicable disease outbreaks, and/or surveillance system problems.

3. Determine the priority of case and outbreak investigations based on established protocols, including the PADOH Epidemiology Manual for the identification, Investigation and Control of Infectious Diseases.
4. Analyze, interpret, and report communicable disease investigation activities to the PADOH Bureau of Epidemiology through PA NEDSS
5. Conduct quality assurance reviews to assure that investigations are completed in a timely, thorough manner.
6. Work in partnership with PADOH epidemiologists to develop, implement, and evaluate disease prevention/reduction interventions.
7. Perform active case finding and epidemiological investigation of contacts of a suspected or confirmed case of all communicable diseases.
8. Investigate suspected and confirmed cases of sexually transmitted disease using established protocols to include:
  - Treatment confirmation with client and/or medical provider for AHB STD Clinic clients, pregnant women, any patient age 21 or younger.
  - Conduct contact-tracing of high-risk partners.
9. Collaborate with community partners to reduce the rate transmission of HIV/AIDS through the implementation of prevention/intervention activities as outlined in the Healthy People 2020 Objectives.
  - Increase the proportion of people living with HIV who know their serostatus.
  - Increase the proportion of adolescents and adults who are tested for HIV in the past 12 months with emphasis on men who have sex with men and pregnant women.
10. Continue to provide HIV counseling and testing for individuals at high risk of HIV infection (a minimum of 2085 per year).
11. Promote HIV Risk Reduction activities among partners, known to be HIV positive, using Partner Services guidelines.
12. Refer high risk HIV negative clients to Pre-Exposure Prophylaxis (PrEP)
13. Refer HIV positive clients to Treatment as Prevention (TaSP) HIV managed care providers.

14. Support and participate in the PADOH Data to Care (D2C) initiative.
15. Provide HIV Navigation services for high risk negative individuals.
16. Conduct Tuberculosis assessment, diagnosis, treatment, education, case management, and epidemiological services for clients referred to AHB's TB Clinic and TB Program.
  - Screen individuals at risk for TB to locate persons infected with TB and assure that they complete therapy; screening may also identify cases of active disease.
  - Conduct contact investigations to identify persons who have active TB and infected persons at high risk for developing TB.
  - Identify and completely treat all persons who have Tuberculosis.
17. Collaborate with the local public health emergency preparedness efforts to provide education and administration of mass immunization programs as indicated.
18. Continue to distribute information about communicable disease prevention services, reporting requirements, and disease information to the health care community.
19. Continue to promote communicable disease services through health education activities.

### **Objective 18**

Assure the prevention and containment of infectious and vaccine-preventable diseases in conjunction with health care professionals.

### **Activities**

1. Provide communicable disease education sessions and act as a resource for health care professionals, human service agencies, school district nurses, and community organizations regarding:
  - Communicable disease transmission and related risk factors
  - Communicable disease detection and reporting requirements
  - National Electronic Data Surveillance System (NEDSS)
2. Continue to collaborate with local and regional partners to assess the incidence of Hepatitis C infection and the availability of care.

3. Increase the number of communicable diseases and reportable conditions reported to the Health Bureau through active surveillance by maintaining a close working relationship with area physicians, hospitals, laboratories and sentinel reporters.
4. Report disease trends and provide in-service briefings (as requested) for local hospital infection control committee meetings at area hospital networks (4).
5. Reduce, eliminate or maintain elimination of cases of vaccine-preventable diseases as outlined in the Healthy People 2020 Immunization Guidelines.

### **Objective 19**

Assure the prevention and containment of infectious and vaccine-preventable diseases through community education.

#### **Activities**

1. Provide communicable disease education for the general public and community groups related to:
  - Communicable disease prevention, screening and treatment
  - Risk factors that affect disease transmission
  - Immunization guidelines
  - Communicable disease control topics e.g. STD prevention, HIV/AIDS, Tuberculosis, hand washing, and animal bite prevention.
2. Collaborate with Environmental Health staff to conduct ongoing health education sessions to prevent animal bites, to prevent food borne illness, and to promote hand washing in the City.
3. Collaborate with Allentown's Animal Control Officer and the City's SWEEP Enforcement Program to conduct animal bite investigations.
4. Conduct all Partner Services interviews for newly diagnosed HIV positive individuals to encourage risk reduction/disease prevention behavior.
5. Utilize media opportunities to promote communicable disease prevention education and increase awareness of AHB services.
6. Increase the proportion of sexually active persons who use condoms through the distribution of a minimum of 150,000 condoms per year (including instructional guidelines) to promote safer sex behaviors.
7. Develop and conduct educational presentations to address the prevention of emerging pathogens and infectious agents as the need arises.



8. Distribute PADOH supplied condoms and HIV testing forms to HIV contract agencies.

## **Objective 20**

Provide communicable disease clinical services: sexually transmitted disease, tuberculosis, and adult immunization clinics. Incorporate health education into each clinic visit, home visit, and community outreach activity.

### **Activities**

1. Provide screening, treatment and/or vaccination services for:
  - 2319 Sexually Transmitted Disease clients
  - 330 Tuberculosis clients
  - 1223 Adult Immunization clients
2. Provide a minimum of 5 off-site HIV testing clinics, 50 HIV risk reduction educational programs, 1800 Safer Sex Intervention Programs, 30 disease prevention events, which include abstinence and/or safer sex promotion.
3. Offer HIV risk reduction education to promote and increase proper condom use among all sexually active individuals, including Lehigh County Drug and Alcohol clients.
4. Maintain rapid HIV testing competencies and utilize rapid HIV testing for high-risk groups and/or individuals who present for testing in unconventional venues such as home visits to contacts of positive HIV cases.

## **Objective 21**

Enhance data management, in conjunction with the PA Department of Health, to better reflect disease surveillance, communicable disease investigation, and prevention activities.

### **Activities**

1. Assure that computer equipment, software and networking capability meets the specifications required for electronic reporting and statistical analysis.
2. Utilize the PA NEDSS and Epi Center databases for communicable and reportable disease investigations.
3. Complete monthly Communicable Disease Surveillance reports.

4. Analyze selected communicable disease trends and modify prevention and outreach efforts based on the results.

## **Objective 22**

Maintain staff knowledge of communicable disease epidemiology including procedures and resources, current public health issues and practices, and certifications and licensure.

### **Activities**

1. Schedule relevant staff for training related to communicable disease prevention, communicable diseases tracking systems and programs for receiving public health alerts.
2. Assure that the training log reflects individual staff members' participation in certification programs, public health core competency training sessions, public health emergency preparedness training and drills (e.g. CPR/AED certifications, NIMS, conference CE credits, etc.).
3. Update the comprehensive infection control plan including routine screening guidelines, ongoing assessment of facility and staff risk, and TB mask fit testing for all Health Bureau employees.
4. Assure exposure control services for Allentown Health Bureau personnel.

### **Program Evaluation:**

Evaluation will be accomplished through monthly and quarterly assessment of activities, quality assurance review of all patient care and laboratory results, and routine patient/audience satisfaction surveys throughout 2020.

## **MATERNAL AND CHILD HEALTH PROGRAMS**

### **Overview**

The Healthy People 2020 Objectives' maternal, infant and child health goal is to improve the health and well-being of women, infants, children and communities. Services critical to health promotion and disease prevention include prenatal home visits and newborn home visitation, immunization, identification of special health care needs, referral, and health education. The Allentown Health Bureau continues to be the local Title V Agency for the Pennsylvania Department of Health and receives funding for programming to monitor health needs of pregnant women, infants, children and adolescents in the City of Allentown. AHB collaborates with the Allentown Bureau of Building Standards and Safety to identify and prioritize homes of children with elevated blood lead levels, which may require remediation. In addition, the Allentown Health Bureau strives to improve the immunization rates of infants, children, adolescents and adults to protect against Hepatitis, A and B, Polio, Diphtheria, Tetanus, Pertussis, Pneumococcal Disease, Hemophilia Influenza B, Varicella, Measles, Mumps, Rubella, Meningitis A, C, C, and Y, and the Human Papilloma Virus. The Maternal and Child Health Program strives to assure that all women, children, and families have access to health services in the community.

The Allentown Health Bureau continues to address infant, child, and adolescent health as a priority. The PADOH Maternal and Child Health Services Block Grant Priorities 2020-2025, along with the Healthy People 2020 Objectives guide our community efforts to enhance infant, child, adolescent, and adult health among Allentown residents.

The Maternal and Child Health (MCH) Program includes:

- Child and Adolescent Health Advocacy and Home Visitation
- Title V Maternal and Child Health
- Immunization
- Lead
- Dental Health Education
- Child Death Review

The Child and Adolescent Health Advocacy and Home Visitation component provides home visitation, referral, education and support to parents, pregnant teens, and children from infancy to age 18. Health Needs Assessments provide opportunities to link families to health care and social services to promote positive outcomes. Prenatal Visits deliver vital health education, direction, and support to pregnant mothers and families. Newborns and new parents are provided essential health information and anticipatory guidance and advocacy during each Newborn Home Visit. The MCH Program continues to enforce the personal health provisions of the childcare ordinance in Allentown's childcare facilities through inspections and educational programming for childcare center staff.

The Title V Maternal Child Health and Special Health Care Needs portion of the MCH Program includes Newborn Screening Follow-Up.

The Immunization Program strives to improve the immunization coverage rate for children and adolescents in accordance with the Recommended Immunization Schedules, Advisory Committee on Immunization Practices (ACIP) and the Healthy People 2020 Objectives. Comprehensive immunization services are provided for infants, children, adolescents and adults. Vaccines are provided in accordance with the patient eligibility screening criteria from PADOH's 2019 Vaccines for Children Program Provider Handbook. AHB utilizes the Statewide Immunization Information System (SIIS) database to record all vaccinations and to monitor vaccine inventory. In addition, the program strives to reduce or eliminate Vaccine Preventable Diseases (VPD) in accordance with the CDC, as well as the Healthy People 2020 Immunization Objectives; All VPD cases are investigated in accordance with approved protocols including the PADOH Epidemiology Manual for the Identification, Investigation and Control of Infectious Diseases (2019). AHB co-chairs the Lehigh Valley Immunization Coalition in conjunction with the Bethlehem Health Bureau; many MCH community representatives serve on the coalition.

AHB provides outreach to children, younger than seven years of age, with elevated blood lead levels. Environmental management includes investigations to determine sources of lead exposure in order to apply administrative and legal actions to assure hazard reduction.

The Dental Health Education component strives to increase access to dental services for children and adolescents, to promote positive oral health habits, and to advocate for improvement in the dental health status of our population. AHB links children and adolescents with area dental providers, dental clinics, and the Allentown School District to assure that City children have access to dental care.

The purpose of Child Death Review, a multidisciplinary process, is to help better understand why children in our community die and to help identify how to prevent deaths. The Lehigh County team meets quarterly and includes agencies involved in the safety, health, and protection of children. An AHB representative participates in the Lehigh County Child Advocacy Center Case Review in which a multidisciplinary team conducts Death and Near-Death case reviews.

### **Program Goal:**

To improve the health of pregnant women, infants and children and families by 1) promoting positive health behaviors, 2) assuring that all pregnant women and children have access to primary and specialty health services, and 3) improving systems of care to promote healthy outcomes.

## **2020 Maternal and Child Health Program Objectives**

### **Objective 23**

Assure access to primary and specialized health care services for the children and families of Allentown.

#### **Activities**

1. Perform health needs assessments (700) with families during immunization clinics to determine whether children have a “medical home,” and connect them with health insurance and needed social services.
2. Assist families to obtain primary health care including well-child care, prenatal care, dental care, specialized health care, health insurance, and other social services.
3. Continue to collaborate with the health care community and non-traditional community partners on activities to reduce the incidence of prematurity and/or low birth weight among Allentown infants, and to improve infant and child health outcomes.
4. Participate in local, state, and national initiatives to promote maternal and family health: Lehigh Valley Immunization Coalition, Lehigh County Child Death Review, Lehigh County Child Advocacy Center Case Review Team, Pennsylvania Perinatal Partnership, CityMatch, Nurse Family Partnership Advisory Board, Lehigh Valley Breast Feeding Coalition, Maternal Family Health Services Q. A. Committee, Community Services for Children Health Services Advisory Committee, Project Child of the Lehigh Valley, the Jefferson School Family Health Centers Governance Board, the Allentown School District Immunization Advisory Group, and Safe Kids Allentown-Bethlehem.

### **Objective 24**

Provide the following MCH clinical services: childhood immunizations and urine pregnancy tests. Incorporate health education into each MCH clinic visit, home visit, and community outreach activity.

#### **Activities**

1. Provide lead education and home visits to families of children with elevated blood lead levels in conjunction with Environmental Field Services staff.
2. Provide 2,000 childhood and 1,000 adult immunizations.

3. Provide free urine pregnancy tests for 60 women during Early Pregnancy Testing (EPT) clinics. Counsel pregnant women about positive health behaviors and refer for prenatal care or options counseling. Counsel women with negative test results about conception and/or family planning. Offer HIV tests to women in EPT clinics.
4. Utilize the One Key Question Initiative (OKQ), making women and families healthier and ensure that more pregnancies are *wanted, planned, and as healthy as possible*.

## **Objective 25**

Assess and promote positive health habits, disease prevention and parenting behaviors through the MCH home visitation program for expectant mothers, newborns, infants, children and their families.

### **Activities**

1. Promote healthy behaviors among expectant women, in collaboration with community partners, during the pregnancy and postpartum periods.
2. Assist women who test positive for pregnancy with scheduling their first prenatal care visit before they leave EPT Clinic. Monitor compliance with completion of prenatal appointments and initial well-baby appointments.
3. Educate pregnant women about nutrition, exercise, preterm labor, labor and delivery. Counsel women about smoking cessation, abstinence from drug and alcohol use, folic acid, healthy weight gain, HIV education and testing, and education about the importance of prenatal care visits.
4. Promote recommended newborn and infant care as well as postpartum care, breastfeeding and family planning education, and assessment of behavioral health, including perinatal and postpartum depression.
5. Inform the community and provide educational information on Shaken Baby Syndrome in accordance to the PADOH Shaken Baby Syndrome Education and Prevention Program.
6. Screen expectant and new mothers for Intimate Partner Violence using a validated screening tool, such as the 5 P's.
7. Assess immunization records, normal growth and development, and well-baby visits with families during all MCH home visits.
8. Distribute and promote the use of the Pennsylvania Immunization Card for all patients receiving immunizations.

9. Collaborate with Injury Prevention staff to promote and implement the Safe and Healthy Homes Program.
10. Provide breastfeeding education and support to increase access to resources needed to initiate and continue breastfeeding.
11. Provide safe sleep education utilizing the “Back to Sleep” campaign for infants and conduct follow up bed risk assessments.
12. Utilize the Bright Futures Guidelines, provide anticipatory guidance for families during home visitation related to: health and safety habits, injury and illness prevention, smoking around infants, breastfeeding, nutrition, oral health, infant care, parent-infant interactions, family relationships, and community interaction.

## **Objective 26**

Educate the professional community about selected topics to improve the health status of children and families in Allentown.

### **Activities**

1. Provide educational sessions and act as a resource for health care professionals, childcare agencies, human service agencies, and community organizations regarding:
  - Immunization guidelines,
  - Childhood lead poisoning prevention,
  - Oral health habits,
  - Risk factors that affect infant and child health outcomes, and
  - MCH Intervention/education sessions.
2. Conduct childcare center inspections of Allentown facilities (55) in conjunction with Environmental Field Services.
3. Promote maternal and child health services through education activities and information distribution.
5. Inform health care providers about pressing public health issues, for example, changes in vaccine eligibility criteria.
6. As part of the Lehigh Valley Immunization Coalition, provide periodic updates on immunizations to interested agencies and continue to develop community-wide strategies for improving immunization rates.

## **Objective 27**

Educate the general public about selected topics to improve the health status of children and families in Allentown.

### **Activities**

1. Provide educational sessions for children and families related to:
  - Immunization guidelines
  - Childhood lead poisoning prevention
  - Oral health habits
  - Child health and development
  - Breast feeding
  - Risk factors that affect infant and child health outcomes
  - Teen pregnancy prevention
  - Communicable disease control
2. Promote child and family health through participation in public awareness campaigns (National Infant Immunization Week, and National Immunization Awareness Month).
3. Participate in local community events to promote early prenatal care, breast feeding, immunizations and dental care.

## **Objective 28**

Promote Maternal and Child Health screening programs and assist families in gaining access to needed resources.

### **Activities**

1. Promote Newborn Screening and Follow-Up (NSF) through the following steps:
  - a. Locate newborns lost to follow-up
  - b. Provide information to families about screening and local resources
2. Assist families in locating health care coverage for screening, re-screening, diagnostic tests, related MCH services, and medical homes:
  - a. Identify medical providers, educational and community services for children with Special Health Care needs.



## **Objective 29**

Provide services to children with elevated blood lead levels, including environmental management.

### **Activities**

1. Assure children with elevated blood lead levels are linked to pediatric care and are receiving medical case management:
  - For lead levels 5-14µg/dL: Educate parents, guardians, and caregivers regarding sources, effects, and prevention of lead poisoning. Home visits will be offered and conducted as requested.
  - For lead levels 15-19µg/dL: Educate parents, guardians, and caregivers regarding sources, effects, and prevention of lead poisoning. A child with two consecutive venous blood lead levels between 15-19µg/dL within three months will result in having an environmental investigation and healthy homes visit.
  - For lead levels 20µg/dL and above: Collaborate with Environmental Field Services to conduct a healthy home visit, environmental investigation and obtain a parental agreement for action. The need for remediation is determined by the results of the environmental investigation. Ensure child receives Early Intervention referral.

## **Objective 30**

Continue to perform community-wide assessments to determine the number of Allentown residents who have received age-appropriate immunizations.

### **Activities**

1. Complete the annual immunization record assessment and compare results to local, state and national benchmark data.
2. Monitor and evaluate AHB childhood and adult vaccinations via the Statewide Immunization Information System (SIIS) database.

## **Objective 31**

Increase immunization rates and reduce vaccine-preventable diseases among infants, children and adults.

### **Activities**

1. Promote immunization activities for children, adolescents and adults in the Allentown community as part of the state-wide effort to improve immunization rates across the lifespan.

2. Participate in the LVHN community Flu Clinic in November 2020.
3. Conduct weekly walk-in clinics during the influenza immunization season to vaccinate children and adults. Encourage influenza immunizations for patients and family members during Tuberculosis Clinics and Childhood Immunization Clinics.
4. Conduct weekly adult immunization clinics providing the following vaccines: Hepatitis A, Hepatitis B, Tdap, HPV, Meningococcal (Serogroups ACWY & B), Hib, Polio, Rotavirus, Tetanus, MMR, Varicella, and Pneumococcal (conjugate and polysaccharide), for City of Allentown residents.
5. Participate in back-to-school activities to educate parents on immunization requirements and vaccinate students who are not up to date with their immunizations.
6. Provide vaccine information to WIC, HeadStart and other local agencies that serve children and families.
7. Collaborate with agencies, such as Lehigh Valley Hospital Street Medicine and The Bradbury Sullivan Center to provide Hepatitis A and Influenza Immunizations to vulnerable populations as well as offer Hepatitis A vaccine to those at-risk during STD clinic twice weekly.

### **Objective 32**

Promote dental health for children, adolescents and adults in Allentown.

#### **Activities**

1. Provide individual education to 400 parents with children about: a) nutrition and oral health, b) the importance of early dental check-ups, and c) the prevention of nursing bottle syndrome through advocacy and outreach efforts.
2. Encourage the community to utilize fluoridated tap water rather than bottled water to mix baby formula or to drink.

### **Objective 33**

Coordinate Lehigh County Child Death Review Team and implement the team's recommendations to promote the safety and wellbeing of children and to reduce child fatalities.

### **Activities**

1. Convene Lehigh County agencies involved in the safety, health and protection of children.
2. Conduct quarterly Lehigh County Child Death Review Team meetings.
3. Analyze child deaths from birth through the age of 21 years to determine factors that could prevent future deaths among children/adolescents.
4. Follow up on prevention recommendations made by the Lehigh County Child Death Review Team.
5. Utilize aggregate data for public health planning, prevention programming and to inform policy discussions.

### **Objective 34**

Improve data collection efficiency and capabilities and monitor data related to maternal child health and dental health.

### **Activities**

1. Continue to analyze vital statistics, maternal child health indicators, census and programmatic data to determine maternal and child health priorities.
2. Continue staff training in the area of web-based research and data analysis: SIIS, NEDSS and PA Child Death Review databases.
3. Update and streamline all MCH program databases to align with monthly reporting requirements.

### **Objective 35**

Maintain staff knowledge of current public health issues, practices, certifications and licensure.

### **Activities**

1. Offer staff relevant educational, training and professional development opportunities.
2. Provide quarterly immunization in-services for staff who administer vaccines.

3. Assure that the training log reflects individual staff members' participation in certification programs, public health training sessions, public health emergency preparedness training and drills.

**Program Evaluation:**

Evaluation will be accomplished through monthly and quarterly measurement of activities, a demonstrable improvement in child immunization rates, quality assurance review of all patient interactions and charts through 2020 and according to the evaluation criteria noted in the MCH Block Grant.

**2019  
Personal  
Health  
Services  
Accomplishments**

## **PERSONAL HEALTH SERVICES**

### **2019 ACCOMPLISHMENTS BY OBJECTIVE – CHRONIC DISEASE CONTROL**

#### **Objective 10 – Partially Achieved**

Provide screenings/assessments for individuals in the community to assure that all individuals regardless of insurance and socioeconomic status have access to heart disease, diabetes and cancer screenings according to national guidelines.

- Conducted cholesterol, glucose and blood pressure screening for 43 new program participants.
- Conducted individual dietary/lifestyle counseling for 28 participants with abnormal glucose and/or lipid levels.
- In conjunction with Lehigh Valley Health Network, St. Luke's University Health Network and Star Wellness, provided cancer screenings and information on available services to uninsured/underinsured individuals as follows:
  1. Provided 400 free clinical breast exams (CBEs).
  2. Provided 683 free mammograms and breast self-examination instruction to uninsured/underinsured women 40 years of age and older. Of the 683 mammograms provided, 170 (25%) of the results indicated that the client needed further testing. Case-management of these abnormal results was provided.
  3. Provided 301 free breast ultrasounds to uninsured/underinsured women who were recommended for the diagnostic breast test. Of the 301 breast ultrasounds provided, 159 (53%) of the results indicated that the client needed further testing. Case-management of these abnormal results was provided.
  4. 30 individuals were recommended for a breast biopsy, 12 of whom were diagnosed with breast cancer. The available financial assistance options were reviewed, and the individuals were linked to the appropriate programs.
  5. Provided 561 free gynecologic examinations and Pap tests, if indicated, to uninsured/ underinsured women 21 years of age and older.

#### **Objective 11 – Achieved**

Conduct community awareness initiatives and/or campaigns to reduce chronic disease incidence and mortality.

- Participated in the national Go Red for Women campaign to raise awareness of heart disease in women. All City of Allentown employees were encouraged to wear red on February 1.

- Participated in National Public Health Week in April. The Director of Health highlighted all Health Bureau programs, including the Million Clicks walking program and anti-hunger campaign at a press event in Allentown city council chambers.
- Posted social media messages to encourage walking on National Walking Day on April 4.
- Provided fresh fruits and vegetables to the LV Breastfeeding Coalition for a promotion event during Breastfeeding Awareness month in August.
- Observed Hunger Free Action Month in September where the Mayor read an anti-hunger Proclamation at an Allentown City Council meeting.
- Celebrated National Walk to School day on October 2 at an elementary school to promote safe physical activity.
- Participated in a national Lights on Afterschool event on October 24 at the Migrant Education Program in Allentown to promote afterschool meals.
- Collaborated with cancer control partners to promote breast and cervical cancer screening and early detection during National Breast Cancer Awareness Month events.

### **Objective 12 – Partially Achieved**

Educate the community on methods to reduce chronic disease risk factors (e.g., nutrition, exercise and other lifestyle changes).

- Conducted a total of 15 chronic disease risk reduction education presentations/events for the general community.
- Implemented strategies to decrease adolescent overweight in the City of Allentown:
  1. Counseled 8 overweight youth. There was a total of 27 counseling sessions.
  2. Held the 26<sup>th</sup> annual Alliance Summer Recreation Program for inner-city children during the month of July. A total of 262 children registered with an average daily attendance of 95.
  3. Participated as active members of various committees/coalitions focused on youth (i.e. Healthy Kids Healthy Allentown/Anti-Hunger Task Force, Allentown Community Garden Coalition, Lehigh Valley Food Policy Council, School Advisory Boards).

### **Objective 13 – Achieved**

Implement policy, environment, and systems changes that support healthy eating and increased physical activity.

- Continued to promote pedestrian and bicycle safety through infrastructure changes, education, public outreach and policies. 1) Allentown received \$500,000 as phase 3 of a \$982,000 grant from Pennsylvania's CED department's multimodal transportation fund to complete a lighting project for

- its American Parkway. 2) Contracted with Community Bike Works to provide bike education to youth in Allentown. Continued to make bike racks available to interested community organizations, businesses and schools. Also fitted 70 bike helmets for youth. 3) The Allentown Urban Greenway, a two-mile fitness loop connecting downtown with parks and greenspaces was opened. The mayor, city officials and funder, Phantoms Charities, came together to dedicate the greenway which provides significant space for safe walking in the city. One of the Million Clicks for Million Hearts “click-in” stations are located along the loop.
- Increased access to local, organic produce and other foods in the community through initiatives such as community gardens, fruit and veggie mobile farm market programs and other related initiatives. 1) The Allentown Community Garden Coalition continued to meet monthly supporting efforts to sustain the 17 existing community gardens and support new gardens. 2) “Fruits and Veggies on the Move” continued this past summer distributing a variety of fresh fruits and vegetables to approximately 800 children on the City’s 17 playgrounds, and 3 community sites from its “Fruits and Veggies on the Move” truck. 3100 servings of fruits and vegetables were delivered. 3) The farm share program, run by Rodale Institute, offered seasonal organic produce to participants at a pick-up point at the Greater Valley YMCA. Ten individuals subscribed to the farm share program in 2019. In addition, fresh local organic produce was available to purchase a la cart. Shoppers were able to use SNAP and FMNP vouchers.
  - Expanded participation in the afterschool and summer meal programs to impact food insecurity. A total of 69,299 meals were served in summer 2019, a 23% increase over the summer of 2018. As part of the CHAMPS anti-hunger grant awarded to Allentown, a marketing firm was hired to implement comprehensive promotion of summer and afterschool meals using signage, flyers, direct mail, internet and social media and community events. During 2019, open meal sites included two hospitals, one municipal pool, the Greater Valley YMCA, the library and nearly every Allentown public school building. One fire station committed to serving after-school meals on Fridays – a unique approach branded “Firehouse Fridays”. Firehouse Fridays continued during the summer of 2019. St. Luke’s University Health Network and Greater Valley YMCA sought and received meal sponsor status through the Pa Department of Education. Allentown hosted a statewide convening to showcase its anti-hunger campaign and share best practices with other Pennsylvania communities.
  - Continued the city-wide free walking program Million Clicks for Million Hearts. The program utilizes unique “click to walk” technology that enables participant walks to be tracked. By the end of 2019, 3,399 participants registered for the program and 172,642 clicks were clocked.
  - Participated in numerous webinars and conference calls that address childhood obesity, nutrition and physical activity. (e.g. US Department of Health & Human Services Region III Childhood Obesity Taskforce, National



League of Cities, Food Research and Action Center, Chronic Disease Collaborative, etc.)

#### **Objective 14 – Achieved**

Promote cancer prevention and screening messages to reduce cancer incidence and mortality.

- Conducted a one-on-one education with the individuals (757 females and 2 males) enrolled in the breast cancer screening program and reviewed the recommendations for cancer prevention and early detection, promoted sun safe behaviors, and stressed the importance of adhering to the screening recommendations for breast, cervical, skin and colorectal cancers.
- Promoted the breast and cervical cancer screening program to uninsured/underinsured women via mailing to physicians, distributing brochures at health fairs, and ongoing collaboration with hospital facilities.
- Collaborated with our community partners to discuss, plan and implement cancer prevention and control activities in the Lehigh Valley.
- Coordinated 5 meetings with cancer control partners to develop and implement marketing, outreach and education strategies to promote breast and cervical screening.
- Collaborated with cancer control community partners to promote early detection of breast and cervical cancer and the importance of screening tests through 3 community education and outreach events.

#### **Objective 15 – Achieved**

Monitor chronic disease morbidity and mortality.

- Compiled data analyzing utilization of the breast and cervical cancer program services. (See Appendix A-1 & A-2)
- Compiled data comparing heart disease mortality, number, and rate for Allentown, Lehigh County, Pennsylvania and the United States, 1990-2017. (See Appendix B-1)
- Compiled national, state and local/regional overweight and obesity rates for adults and youth. (See Appendix B-2 & B-3)

#### **Objective 16 – Achieved**

Maintain current certifications and licenses and assure staff knowledge of current public health issues and practices.

- Staff completed required and recommended educational, training and professional development sessions/ conferences.
- Maintained a training log that reflects individual staff members' participation in certification programs, public health emergency preparedness trainings

and drills (e.g. CPR/AED certifications, conference CE credits, sector trainings, etc.)

## **2019 ACCOMPLISHMENTS- COMMUNICABLE DISEASE**

### **Objective 17 – Achieved**

- All reports of communicable disease or reportable conditions in the City of Allentown will be epidemiologically investigated and appropriate control methods and interventions will be instituted in accordance with the PA DOH's Policy and Procedures Manual for the Identification, Investigation and Control of Reportable Diseases (2008), *PA Code/Chapter 27 and the Epidemiology Manual for the Identification, Investigation and Control of Reportable Diseases (2019)*.

Chart 17.1 below illustrates City of Allentown Communicable Disease & Reportable Conditions: 2015-2019.

Chart 17.1

<b>DISEASE</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
Animal Bites	215	297	248	252	301
Infant Botulism	1	0	0	0	0
Campylobacter	10	14	10	5	15
Chlamydia	805	1071	1059	1181	1222
Cryptosporidium	1	3	3	1	5
E coli 0157-H7	0	3	0	0	0
Giardiasis	2	5	8	7	0
Gonorrhea	116	203	333	261	235
Hepatitis A	0	0	0	2	2
Hepatitis B	0	37	28	11	4
Hepatitis C	97	195	125	191	206
Legionella	1	4	9	8	5
Lyme	17	18	8	4	32
Malaria	0	0	2	0	2
Meningitis – Aseptic	1	2	0	4	3
Mumps	0	0	1	1	1
Pertussis	0	56	8	7	7
Salmonellosis	10	15	11	14	13
Shigellosis	0	6	5	4	13
Syphilis Infectious	3	8	23	46	52
Toxoplasmosis	0	1	0	0	0
Tuberculosis Active	1	2	1	8	3
West Nile Virus	0	0	0	0	0
Zika cases confirmed(pregnant)	0	26	4	0	0

- Epidemiological interviews were conducted in accordance with the PA DOH Epidemiology Manual for the Identification, Investigation and Control of Reportable Diseases (2019).
- Conducted 2,313 epidemiological investigations of communicable diseases (other than STDs).
- Initiated 301 animal bite investigations.
- Conducted reviews of disease surveillance data at least once daily via PA National Electronic Disease Surveillance system (PA-NEDSS).
- Conducted reviews of frequently released Epi Center reports: these highlighted emerging infections within Pennsylvania and the United States.
- Conducted 1,509 epidemiological investigations of sexually transmitted diseases.
- Conducted more than 1,400 reviews of ongoing surveillance investigations for previously positive HIV cases, to ensure complete case documentation.
- Identified 6 newly diagnosed individuals with HIV infection.
- Conducted 20 Partner Services interviews to elicit sex/needle-sharing partners of HIV positive patients.
- Investigated 1,032 confirmed Influenza cases, 934 Flu A and 98 Flu B.
- Investigated 270 Respiratory Syncytial Virus infections.
- Conducted epidemiological investigations related to 3 active Tuberculosis (TB) cases; all 3 cases were Pulmonary. (See Appendix C-1 for Active TB and Latent TB Infection Data 2010 – 2019 and Appendix C-2 for Active TB Cases by Race/Ethnicity).

### **Objective 18 - Achieved**

Assure the prevention and containment of infectious and vaccine-preventable diseases in conjunction with health care professionals.

- Communicable Disease related health alerts were discussed at four local infection control meetings with health care professionals on a routine basis.
- Conducted one educational session about Tuberculosis with medical professionals (68).
- Provided HIV counseling and testing for 2085 individuals at risk for HIV infection. (See Appendix D for HIV data 2010 – 2019)
- Promoted communicable disease reporting through participation in three hospitals' Infection Control meetings, St. Luke's University Health Network (SLUHN) – Allentown Campus and SLUHN - Sacred Heart Campus, and Good Shepherd Rehab Hospital (GSRH) and Cedarbrook Nursing Home.
- During a 21-day period AHB staff participated in a Measles investigation which involved working with local health care facilities, the PA Dept of Health and other entities to follow up with contacts of the confirmed Measles case; this was the first confirmed case in the city in the last 20 years. Within 24 hours of notice the patient was interviewed and a timeline of contact and exposure was established. The contact investigation included communication with 36 individuals who attended these public locations during the time in question. Of those, 19 contacts could not provide proof of immunity and they

had measles titers drawn at the Allentown Health Bureau. Lab testing revealed that 5 contacts were not immune to Measles and therefore required home isolation. A court issued home quarantine order was issued for 1 of these individuals. All five remained in daily communication with staff to ensure compliance and successfully completed the home quarantine phase. There were no secondary cases.

### **Objective 19 - Achieved**

Assure the prevention and containment of infectious and vaccine-preventable diseases through community education.

- Provided communicable disease education for the general public and community groups: 68 sessions were conducted and a total of 1184 individuals were educated. Chart 19.1 (below) illustrates 2018 community education efforts:

Chart 19.1

<b><u>Audience</u></b>	<b><u>Sessions (#)</u></b>	<b><u>Educated (#)</u></b>
College Students	5	200
Adults in Drug & Alcohol Recovery	48	793
<b>Total</b>	53	993

- Distributed over 150,000 condoms with instructional material including, but not limited to, colleges, Drug and Alcohol Treatment Centers, STD/HIV Clinic patients.
- Provided 48 Safer Sex intervention sessions on STD/HIV to the above-targeted audiences, for 793 participants educated.

### **Objective 20 - Achieved**

Provide communicable disease clinical services: sexually transmitted disease, tuberculosis, and adult immunization clinics. Incorporate health education into each clinic visit, home visit, and community outreach activity.

- See Clinical Services Delivery Report Chart, page 61, for service delivery information for STD, TB and Immunization Clinics as well as off-site testing clinics.
- The CDC's 2015 STD Treatment Guidelines and STD standing Orders were utilized for all clients screened and/or treated for STDs.
- Of the 2319 patients tested in our STD Clinics, 282 (.14%) were positive for Chlamydia and 33 (.1%) were positive for Gonorrhea.

- The CDC's 2016 Tuberculosis Treatment Guidelines were used for all clients screened and/or treated for active or latent Tuberculosis.
- A total of 777 people was screened for Tuberculosis; of these 94 were for individuals at risk for TB in the TB RN Clinic.
- Provided T-SPOT and QFT-Plus TB tests to patients when skin tests were contraindicated.
- There were 330 visits to TB RN/MD Clinics for Tuberculosis Treatment.
- Treatment for latent TB infection was initiated with 47 clients; 38 completed therapy and 26 clients were discharged due to noncompliance.

### **Objective 21 - Achieved**

Enhance data management, in conjunction with the PA Department of Health, to better reflect disease surveillance, communicable disease investigation, and prevention activities.

- AHB staff utilized PA-NEDSS to investigate all suspected or laboratory confirmed cases of reportable communicable disease.
- Communicable Disease staff (2) are approved to use the joint HIV/STD PA-NEDSS database for HIV case investigations, data collection, and entry.
- AHB enters all HIV positive patients who accepted Partner Services in the PA-NEDSS database to document partners elicited, partners referred for testing, and HIV positive partners referred to treatment.
- Maintained a Partner Services (PS) worksheet and contact tracing tool to accurately track PS activities, contacts and testing of contacts; facilitated thorough data entry of PS activities.
- HIV Program staff (1) completed HIV Navigation Services Training and developed operational procedures for implementation.
- HIV Program staff worked with the PA DOH HIV Program to plan the Data 2 Care pilot program in Allentown which was implemented in 2019.

### **Objective 22 - Achieved**

Maintain staff knowledge of communicable disease epidemiology including procedures and resources, current public health issues and practices, and certifications and licensure.

- AHB staff continues to apply Continuous Quality Improvement strategies by engaging in Kaizen events coordinated by the CQI team leaders.
- Communicable Disease staff attended training related to epidemiology, infection control, HIV and PHEP.

### Clinical Services - Service Delivery Report 2015-2019

<b>Clinical Services</b>	<b>Total 2015</b>	<b>Total 2016</b>	<b>Total 2017</b>	<b>Total 2018</b>	<b>Total 2019</b>
Number of Childhood Immunizations	1,851	1,648	2,590	2,273	2,498
Number of Adult Immunizations (Total)	1,632	883	2,584	1,582	1,223
Number of Influenza Immunizations	756	897	1,362	1,003	890
Number of Patient Visits to Immunization Clinic: Child 952 Adult 900	1,942	1,144	2,935	1,971	1,848
Number of Communicable Disease Reports Investigated (other than STDs)	460	712	437	1,191	2,313
Number of Reported Animal Bite Investigations Initiated	300	297	248	252	301
Number of HIV Tests Performed	2,077	2,032	2,071	2,009	2,085
Number of Sexually Transmitted Disease (STD) Investigations Initiated via NEDSS: (GC, CT, HIV/AIDS, Syphilis)	1,361	1,289	1,415	1,886	1509
Number of Patient Visits to Sexually Transmitted Disease Clinic	1,990	1,981	2,055	2,262	2319
Number of Partner Services interviews for new or previously HIV infected	10	21	46	17	20
Number of previously positive HIV ongoing surveillance cases investigated	1,582	1,525	1,419	1,307	1,400
Number of newly diagnosed HIV cases investigated	2	2	11	4	6
Number of Patient Visits to TB Clinic (total visits to RN & MD clinics)	278	245	360	424	330
Number of TB Tests Performed (PPD's and IGRA)	861	1,005	1,167	1,262	777
Number of Home Visits for Directly Observed Therapy for TB	69	99	72	306	124
Number of Reported Tuberculosis Investigations Initiated via NEDSS	101	175	210	277	255
Number of MCH Health Needs Assessments Conducted in Clinics	589	533	984	843	632
Number of MCH Referrals Received (Prenatal: 127 Newborn/Child: 656)	470	684	640	735	783
Maternal Child Health Home Visits (Prenatal 101 Newborn/Child 194)	376	437	379	336	295
Number of Pregnancy Tests in Early Pregnancy Testing Clinic	80	64	68	64	36
Number of Children Screened for Lead Poisoning (Venous)	0	12	4	14	50
Number of Lead Home Visits	17	5	45	56	85
Number of Visits to Inspect Child Care Centers	77	59	70	56	58

## **2019 ACCOMPLISHMENTS BY OBJECTIVE - MATERNAL AND CHILD HEALTH**

### **Objective 23**

Assure access to primary and specialized health care services for the children and families of Allentown.

- Chart 23.1 below outlines Health needs assessments conducted in 2019:

Chart 23.1

<b>Health Needs Assessments</b>	<b>2019Total</b>
Health Needs Assessments performed	632
# referred to health care provider	254
# provided insurance information/CHIP	223
# referred to social service agencies	18

- Please refer to the Clinical Services Delivery Report on page 61.
- Performed 632 health needs assessments with families during immunization clinics (see chart 23.1) to determine whether children have a “medical home.” Assisted families to obtain primary care including well-child care, prenatal care, dental care, specialized health care, health insurance, and other social services.
- MCH staff participated in community-wide efforts to improve maternal and child health including: Lehigh Valley Immunization Coalition, Lehigh County Child Advocacy Center Case Review Team, Pennsylvania Perinatal Partnership, CityMatch, Allentown School District Immunization Advisory Group, Maternal Family Health Services Q. A. Committee, Nurse Family Partnership Advisory Board, Jefferson School Family Health Center Governance Board, Lehigh County Child Death Review Team, Project Child of the Lehigh Valley, Safe Kids Allentown-Bethlehem and the Lehigh Valley Breast Feeding Coalition.
- Convened MCH staff meetings to discuss health care needs of City children and families and review strategies to address these concerns.
- Participated in 15 health fairs to promote AHB services.
- Presented 7 dental presentations reaching a total of 223 children.
- Collaborated with the Health Bureau’s Nutrition and Physical Activity Program to refer overweight children for nutritional counseling and after-school activity.



## **Objective 24 - Achieved**

Provide the following MCH clinical services: childhood immunizations and pregnancy urine testing. Incorporate health education into each MCH clinic visit, home visit, and community outreach activity.

- Chart 24.1 below outlines Early Pregnancy Testing Clinic activity for 2019:

Chart 24.1

<b>Early Pregnancy Testing Clinic Activity</b>	<b>2019 Total</b>
# pregnancy tests performed	36
# prenatal care appointments made	16
# confirmed entrance into care	12
# family planning/healthcare referrals	13

- Provided Lead Education and Home Visits (85) to families of children with elevated blood lead levels.
- Preventive health education was provided during each MCH Clinic visit, home visit and community outreach activity.
- Immunized 952 children with 2,498 immunizations; Immunized 900 adults with 1,223 vaccines.
- Of the 36 pregnancy tests performed, 17 were positive. Pregnant women were assisted with scheduling prenatal care appointments at Lehigh Valley Health Network and St. Luke's University Health Network prenatal clinics. These clinics were contacted after their appointment date to confirm that clients attended their first prenatal appointment.
- Educated 21 women about HIV during Early Pregnancy Testing Clinics.
- HIV tests were provided to 14 women in Early Pregnancy Testing Clinics.
- Utilized the One Key Question Initiative (OKQ) during MCH clinic visits, home visits, and community outreach activities, making women and families healthier and ensuring that more pregnancies are *wanted, planned, and as healthy as possible*.
- Utilized Motivational Interviewing (strengths-based) approach, with MCH clients and their families.
- Utilized the 5 P's Tool (Parents, Peers, Partner, Past, Present) to screen for interpersonal violence, substance abuse, and mental health.

## **Objective 25 - Achieved**

Assess and promote positive health habits, disease prevention and parenting behaviors through MCH home visitation programs for infants, children and their families.

- Charts 25.1 and 25.2 outline MCH Referrals and Home Visit Activity respectively for 2019:

Chart 25.1

<b>MCH Referrals</b>	<b>2019 Total</b>
Prenatal Referrals	127
Newborn/Child Referrals	656

Chart 25.2

<b>MCH Home Visits</b>	<b>2019 Total</b>
Prenatal	101
Newborn/Child	194

- Reviewed 194 immunization records during MCH home visits and made referrals to immunization services as needed.
- Educated 101 pregnant women about nutrition, preterm labor, labor and delivery. Smoking cessation, abstinence from drug and alcohol use, folic acid, healthy weight gain, HIV education and testing and educated them about the importance of prenatal care visits.
- Promoted recommended newborn and infant care to 656 families of newborns as well as postpartum care, breastfeeding and family planning discussions and assessed for postpartum depression.
- Promoted the “Bright Futures Guidelines for Health Supervision of Infants and Children during the 101 prenatal home visits and during the 194 newborn home visits. This included anticipatory guidance for the family including health and safety habits, injury and illness prevention, smoking around infants, nutrition, oral health, infant care, parent-infant interactions, family relationships, and community interaction.
- Provided safe sleep education to each of the families of newborns, utilizing the “Back to Sleep” campaign for infants, and conducted follow up bed risk assessments with families identified as at risk.
- A Community Health Nurse and a Community Health Specialist, both certified breastfeeding counselors, are members of the Lehigh Valley Breast Feeding Coalition and are available to provide counseling or discuss solutions to any breastfeeding problems that may arise.
- Conducted 21 MCH Intervention/Education sessions that included discussion of Fetal Alcohol Spectrum Disorder, Neonatal Abstinence Syndrome, Sudden Unexplained Infant Death, Shaken Baby Syndrome and Perinatal Depression.

- Collaborated with Injury Prevention staff to conduct 75 Safe and Healthy Homes visits.

### **Objective 26 - Achieved**

Educate the professional community about selected topics to improve the health status of children and families in Allentown.

- Provided educational sessions and acted as a resource for health care professionals, child care agencies, human services agencies, the Allentown School District, Lehigh Valley Immunization Coalition (LVIC), and community organizations about topics including immunization guidelines, Childhood Lead Poisoning Prevention and screening, hand washing, oral health resources and risk factors that affect infant and child health outcomes.
- Conducted Child Care inspections for 58 Allentown childcare centers in conjunction with Environmental Field Services.
- The Lehigh Valley Immunization Coalition (LVIC), a partnership which includes public health, hospital clinics, school districts, representatives and community representatives met on a bimonthly basis to increase child and adult immunization awareness and to coordinate immunization activities throughout the Lehigh Valley. LVIC collaborated with the National Infant Immunization Week activities, Back to School Campaign, LVHN Community Flu Campaign, and National Influenza Vaccination Week activities.
- Clinical Services Manager presented a Vaccine Update with question and answer session for Allentown School district Health Staff during an in-service day.

### **Objective 27 - Achieved**

Educate the general public about selected topics to improve the health status of children and families in Allentown.

- Provided 45 educational sessions for children and families related to: immunizations guidelines, lead poisoning prevention, oral health habits, child health and development, and communicable disease control e.g. hand washing and cough etiquette.
- AHB participation in several public awareness campaigns: 1) National Infant Immunization Week – distributed gift bags with: Growth charts, sippy cups, and immunization literature and prenatal care providers and prenatal home visitation programs. 2) Adolescent Immunization Campaign. Participated in the Allentown School District's Immunization Advisory group.
- Participated in local health fairs to promote immunizations, dental care, lead poisoning prevention, and early prenatal care.

### **Objective 28 - Achieved**

Promote Maternal and Child Health screening programs and assist families gain access to needed resources.

- Assisted families in locating health care coverage for screening, rescreening, diagnostic tests, related MCH services and medical homes. Identified medical providers, educational and community services for children with Special Health Care needs.
- The MCH staff educated families about the benefits of the Virtual Health Village and obtained signed consent forms during Immunization Clinics and home visits, completed consent forms were forwarded to Allentown School District.
- MCH staffs provide information about Newborn Screening and Follow-up (NSF) through the following steps: locate newborns lost to follow-up, distribute Newborn Screening brochures, and provide information to families about screening and local resources. AHB did not receive any inquiries in 2019.

### **Objective 29 - Achieved**

Provide services to children with positive lead screening test results including environmental management in accordance with the Lead and Healthy Homes Program.

Chart 29.1

<b>Lead Activity</b>	<b>2019 Total</b>
Lead Home Visits (>5mcg/dL)	85
Number of Children Screened for Lead Poisoning	50

- Collaborated with Environmental Field Services staff who conducted environmental investigations in homes of children with elevated blood levels.
- Coordinated Lead Home Assessments, see table above.
- Facilitated property renovation and remediation for homes that were identified to contain lead via the City's Lead Program.

### **Objective 30 - Achieved**

Continue to perform community-wide assessments to determine the number of Allentown residents who have received age-appropriate immunizations.

- Immunization Program staff continued to monitor and evaluate AHB childhood and adult vaccinations via the Statewide Immunization Information System (SIIS) database.
- All children who received VFC vaccines were screened for VFC eligibility prior to vaccination.

- Families were given information about how to obtain health insurance and primary care and staff offered to assist them with getting linked to health care as needed.
- Collaborated with the PADOH to assure that all Allentown childcare schools submitted reports with each enrolled child's immunization status to the PA Immunization Program.
- Participated in the PADOH State Immunization Law Report validation process, ensuring that Allentown school age children are protected from vaccine preventable diseases.
- Collaborated with LVIC in addressing the ongoing challenges surrounding the Pennsylvania Immunization School Law Regulations to Allentown family practice and pediatric clinics.

### **Objective 31 - Achieved**

Increase immunization rates and reduce vaccine-preventable diseases among infants, children and adults.

- Promoted immunization activities for children, adolescents and adults in the Allentown community as part of the state-wide effort to improve immunization rates across the lifespan.
- Immunized 900 adults with 1,223 vaccines.
- Immunized 952 children with 2,498 vaccines.
- Conducted weekly adult immunization clinics providing the following vaccines: Hepatitis A, Hepatitis B, Tdap, Hib, Polio, Rotavirus, HPV, Meningococcal (Serogroups ACWY & B), Tetanus, MMR, Varicella, and pneumococcal (conjugate and polysaccharide), for City of Allentown residents.
- Provided 890 seasonal flu vaccines to children and adults, including City of Allentown employees and their families during walk in clinics at AHB, City work sites, and throughout the community.
- Collaborated with the Allentown School District to implement the Pennsylvania School Immunization Law regulations that took effect in 2017.
- Provided vaccine information to WIC, HeadStart and other local agencies that serve children and families.
- Provided free age appropriate vaccines to infants and children in the City of Allentown.
- Participated in the LVHN Community Flu Clinic in November 2019.

### **Objective 32 - Achieved**

Promote dental health for children, adolescents and adults in Allentown.

- Facilitated dental care access for needy children through Valley Wide Smile, local dental clinics, and dental vans including Miles of Smiles (LVHN) and

the St. Luke's University Health Network Dental Van. Note: all Valley Wide Smile funds were expended at the end of 2017.

- Provided dental education during prenatal, newborn home visits, and childcare facilities. Reached 217 parents with children about nutrition and oral health, the importance of early dental check-ups and the prevention of nursing bottle syndrome through advocacy and outreach efforts.
- Encouraged the community to utilize fluoridated tap water rather than bottled water to mix baby formula or to drink.
- Educated 194 new mothers about the importance of early dental care and other preventative strategies to reduce the risk of baby bottle tooth decay.

### **Objective 33 - Achieved**

Coordinate Lehigh County Child Death Review Team and implement the team's recommendations to promote the safety and wellbeing of children and to reduce child fatalities.

- Convened Lehigh County agencies involved in the safety, health and protection of children.
- Conducted quarterly Lehigh County Child Death Review Team meetings during 2019.
- Analyzed child deaths from birth through the age of 21 years to determine factors that could prevent future deaths among children/adolescents.
- Followed up on prevention recommendations made by Lehigh County Child Death Review Team.
- Utilized aggregate data for public health planning, prevention programming and to inform policy discussions.

### **Objective 34 - Achieved**

Improve data collection efficiency and capabilities and monitor data related to maternal child health and dental health.

- Continued to analyze vital statistics, maternal child health indicators, census and programmatic data to determine Maternal and Child Health priorities.
- Continued staff training in the area of web-based research and data analysis: SIIS, PA NEDSS and PA Child Death Review databases.
- Updated and streamlined all MCH databases to match monthly reporting requirements and grant deliverables.

### **Objective 35 - Achieved**

Maintain staff knowledge of current public health issues, practices, certifications and licensure.

- Offered staff relevant educational, training and professional development opportunities.
- Provided immunization in-services for staff who administer vaccines.
- Staff delivered monthly briefings on updates and emerging research within their area of expertise.
- Assured that the training log reflects individual staff members' participation in certification programs, public health training sessions, public health emergency preparedness training and drills (e.g. CPR/AED) certifications, conference CE credits, sector training, etc.
- Participated in "Immunization: Storage and Handling" and "Immunization: You Call the Shots" webinars presented by the CDC.

### **Program Evaluation**

Evaluation will be accomplished through monthly and quarterly measurement of activities, a demonstrable improvement in child immunization rates, quality assurance review of all patient interactions and charts through 2019.

**2020  
Environmental  
Health  
Services  
Program Plans**



## **ENVIRONMENTAL HEALTH SERVICES SECTION**

### **Overview**

The Environmental Health Services Section of the Bureau of Health conducts those mandated Act 315 environmental health programs pertinent to the City of Allentown.<sup>1</sup> The Environmental Health Services Section is comprised of the Environmental Field Services Division, the Injury Prevention Division and Public Health Emergency Preparedness.

Organizationally, the Environmental Health Services Section is under the administrative direction of the Bureau's Associate Director for Environmental Health Services. The Environmental Field Services Manager directs the day-to-day activities of 5 Sanitarians in 3 primary programs – Food Protection, Institutional Sanitation and Safety, and Environmental Control as described below. The Injury Prevention Services Manager directs the activities of two Community Health Specialists in the Injury Prevention Program. The Public Health Emergency Preparedness Manager plans, coordinates and assesses initiatives and trainings to ensure local readiness.

### **BUREAU OF HEALTH ENVIRONMENTAL HEALTH SERVICES**

#### **COMMONWEALTH OF PENNSYLVANIA - MANDATED ENVIRONMENTAL HEALTH PROGRAMS**

<b>State Mandated (Act 315) Environmental Health Programs<sup>1</sup></b>	<b>Health Bureau Program</b>
1. Food Service Sanitation	Food Protection
2. Institutional Sanitation	Institutional Sanitation and Safety
3. School Sanitation	Institutional Sanitation and Safety
4. Public Bathing Place Sanitation and Safety	Institutional Sanitation and Safety
5. Vector Control	Environmental Control
6. Water Pollution Control	Environmental Control
7. Organized Camp	Environmental Control
8. Recreation Area	Environmental Control
9. Housing Environment	Environmental Control

*1. There are no bottled water plants, mobile home parks or campgrounds in the City, precluding the need for such programs. The City leases its Water and Sewage Treatment plants to the Lehigh County Authority, which is regulated by the PA Department of Environmental Protection.*

The Environmental Field Services Division conducts the following programs to meet the basic environmental health requirements of the citizens of the City of Allentown.

- I. Food Protection Program
  - Food Service Establishment Inspection and Licensing
  - Food-borne Disease Surveillance and Investigation
  - Food Safety Training and Public Awareness
- II. Environmental Control Program
  - Housing Hygiene and Sanitation
  - Lead Source Reduction
  - Vector Control
  - Noise Control
  - Indoor Air Quality
  - On-Lot Sewage Disposal
  - Pollution Incident Response
  - Public Health Nuisances
- III. Institutional Sanitation and Safety Program
  - Child Care Facility Inspection and Certification
  - Public Bathing Place Inspection
  - School Inspection
  - Long Term Care Facility Inspection

The Injury Prevention Division's mission to reduce unintentional and intentional injury is accomplished through a comprehensive strategy including, in-home education and assessments, community programs and collaborative work with community programs to promote injury prevention education and interventions to as many individuals as possible.

#### Injury Prevention Program

- Traffic Safety
  - a. Motor Vehicle Safety
  - b. Pedestrian Safety
- Residential Safety
  - a. Child Home Injury Prevention
  - b. Senior Falls Prevention
- Traumatic Brain Injury Prevention
- Poison/Overdose Prevention
- Violence Prevention
  - a. Suicide Prevention
  - b. Child Maltreatment/Abuse Prevention

The mission of the Public Health Emergency Preparedness (PHEP) Program is to lead the City in preventing, responding to and reducing the public health consequences of emergencies and disasters. Through collaboration with local and regional preparedness and response partners, the PHEP addresses public health preparedness, response, recovery, and mitigation activities.

- Public Health Emergency Preparedness Capabilities
- Medical Reserve Corps (MRC)

## **FOOD PROTECTION PROGRAM**

### **Overview**

The Food Protection Program services include:

- Food Service Establishment Inspection and Licensing
- Food-borne Disease Surveillance and Investigation
- Food Safety Training and Public Awareness

Food safety is a common concern now shared by most Americans. Nationwide recalls in recent years of a wide variety of food products, including hard-boiled eggs, cut fruit, romaine lettuce, deli-sliced meats and cheeses, and ground beef among others, has led to an increased awareness and concern by the public about food safety. National, state and local resources devoted to the prevention of food-related disease and to further educate consumers about food safety issues increase annually. The food industry expends a significant percentage of their collective budgets to developing new methods of safe food production and new food technologies. Despite these efforts, the Centers for Disease Control and Prevention estimates that more than 48 million cases of food-borne illness occur annually resulting in more than 3,000 deaths. Even with increased surveillance activities, the underreporting of food and waterborne illnesses is a recognized fact. Consequently, it is likely that the number of cases of potential food and waterborne illnesses reported to the Allentown Health Bureau represents only a fraction of the actual number of occurrences.

The broad objective of the Food Protection Program is to reduce the risk of food-borne illness by assuring that food and beverages sold for public consumption has been stored, prepared and served in a safe manner and is wholesome and unadulterated. This program's primary activities are inspecting and licensing all eating and drinking establishments, large and small retail grocers, cafeterias, commissaries, food vendors at special events and certain food vending machines. Investigations of potential food-borne disease outbreaks within the City of Allentown are conducted. A major emphasis of the program is to educate food handlers and food service operators in proper food protection techniques as well as public education efforts to promote food safety.

### **Program Goal:**

Assure a high level of food safety and sanitation practices in all licensed food service operations utilizing an inspection protocol based upon a food hazard identification and risk assessment and providing food safety education to the food handlers and the community.

## **2020 Food Protection Program Objectives**

### **Objective 36**

License and inspect all food service establishments subject to the City of Allentown Food Code, including but not limited to, restaurants, retail food facilities, mobile food units, temporary food stands and potentially hazardous food vending machines.

#### **Activities**

1. Inspect all permanent structure and mobile food service establishments in accordance with a risk-based inspection schedule to assure compliance with applicable food safety standards:
  - a. All low risk facilities shall be inspected at least once annually.  
(Approximately 554 in 2019)
  - b. All moderate risk facilities shall be inspected at least 2 times annually.  
(Approximately 241 in 2019)
  - c. All high-risk facilities shall be inspected at least 3 times annually.  
(Approximately 118 in 2019)
2. Utilize Hazard Analysis Critical Control Point (HACCP) principles as warranted in the investigation of suspected food-borne disease outbreaks.
3. Conduct a comprehensive plan review of each proposed new facility, facilities undergoing extensive renovations, and facilities undergoing changes of ownership.
4. Evaluate applications by food service establishments who seek inclusion in the City's municipal waste collection system in cooperation with the Bureau of Solid Waste and Recycling.
5. Inspect (or otherwise assess compliance with the applicable Food Code) all temporary food facilities at special events prior to the serving of food to the public.
6. Maintain specific geographic inspection areas for each of the 5 Sanitarians.
7. Respond as required to reported emergencies that affect licensed food service establishments (e.g., power outages, sewage overflows) within 4 hours of notification.

### **Objective 37**

Continue to utilize Computer Aid Inc.'s *PAFoodSafety* web application inspection software maintained by agreement with the Pennsylvania Department of Agriculture (PDA), and other software, to enable mobile data management in the field as well as in the office environment.

#### **Activities**

1. Facilitate technical support and customizations to the *PAFoodSafety* system through PDA and CAI to provide for the administrative and field utilization needs of AHB food inspection activities; assure training for all environmental health staff provided by PDA and CAI is completed prior to implementing any changes to inspection software.
2. Assure continued use of compatible support documents with the field inspection software on tablet PC's in the field.
3. Utilize *PAFoodSafety* functions to reduce paperwork and archived facility documents by scanning applications and other relevant documents.
4. Maintain GIS spatial software and the quarterly updating of associated food establishment data files on tablet PC's.

### **Objective 38**

Maintain standardized food service plan review, licensing and inspection procedures.

#### **Activities**

1. Conduct a supervisory review of food service inspection reports prior to submission to the PDA public access website to assure staff consistency and competency in the interpretation and documentation of violations and the corrective actions required for compliance.
2. Conduct inspections alongside a representative from the Pennsylvania Department of Agriculture to assure staff consistency with the State's interpretation and documentation of violations and the corrective actions required for compliance.
3. Utilize the food service policy and procedure manual to ensure consistency in program delivery by each Sanitarian.
4. Conduct supervisory review of each completed plan review and conduct a supervised food service establishment inspection semi-annually with each Sanitarian to assure compliance with established policy.

5. Conduct at least 2 peer standardization inspections with each Sanitarian annually.
6. Actively participate in the City's ongoing efforts to further refine the "one-stop-shop" permit process in cooperation with other City bureaus.

### **Objective 39**

Enhance staff knowledge of current food safety principles, code interpretations, food recalls and regulations through training opportunities.

#### **Activities**

1. Assure each Sanitarian attends at least 1 CASA - sponsored training and completes at least 3 food protection training opportunities on-line such as courses offered through FDA's ORAU or the AFDO "Virtual Access" on-line training sites.
2. Assure ongoing training for Sanitarians in the provisions and applicability of the City's Food Service Sanitation Ordinance No. 14189, PA Act 106 of 2010 (PA 3 C.S.A. § 5701 – 5714), Title 7 Chapter 46 - The Food Code, and the most current version of the FDA Model Food Code.
3. Fully review the food service policy and procedure with Sanitarian staff and revise where warranted.
4. Encourage and provide support to each Sanitarian who pursues professional credentials and certifications such as NEHA's Registered Sanitarian (REHS/RS) and Pennsylvania Department of Health Local Health Officer.
5. Assure each Sanitarian maintains current ServSafe credentials.
6. Assure the Environmental Field Services Manager routinely accesses websites for FDA, USDA, PDA and DOH to check for food recall notices, food safety alerts, interpretation memos and enforcement actions and relays relevant information to the Sanitarians.
7. Accurately compile and record all staff training acquired during the year.

## **Objective 40**

Allocate program resources in an efficient manner using food hazard risk assessment.

### **Activities**

1. Assure that a food hazard risk assessment utilizing the current risk assessment tool is performed annually on each facility to determine annual inspection frequency.
2. Review and revise as necessary the risk assessment tool to assure relevance to current food safety concepts and Food Code regulations.

## **Objective 41**

Maintain efforts to ensure compliance in licensed food service facilities where chronic or severe violations are identified during inspections.

### **Activities**

1. Utilize the various enforcement actions sanctioned by law (i.e., violation tickets, citations, and administrative conferences) as per established policy to address non-compliant facilities.
2. Maintain cooperative efforts with other City bureaus to assure compliance by licensed facilities with other applicable ordinances and regulations.
3. Document compliance status on each facility's inspection report in accordance with established guidelines.
4. Maintain and utilize violation ticket software to assure the prompt issuance of tickets to food service operators for non-compliance with the Food Code.
5. Assure compliance with the state's Food Employee Certification requirement by taking appropriate enforcement action against chronic violators discovered during routine inspections.
6. Conduct timely re-inspections in non-compliant facilities in accordance with Bureau policy to assure compliance.



## **Objective 42**

Fulfill the obligations for uniform food service regulatory activities consistent with Title 7, Chapter 46 - The Food Code and the most current version of the FDA Model Food Code.

### **Activities**

1. Maintain full responsibility for food protection program activities in all eating and drinking places, retail food stores and farm market stands within the City.
2. Monitor the operation and sanitation of frozen dessert machines located in food establishments in the City and report any violations not under the regulatory control of the City to PDA.
3. Submit inspection data to PDA as required.
4. Assure food service regulatory uniformity with PA Code Title 7, Agriculture Chapter 46.

## **Objective 43**

Maintain a food-borne disease surveillance system to appropriately respond to food-related complaints or reports of illnesses attributed to food.

### **Activities**

1. Respond within 24 hours to all food-related consumer complaints alleging unsanitary food facilities, unsanitary food handling practices, and potentially adulterated, mislabeled or misbranded foods, including commercially processed food products.
2. Maintain a computer-based food-related complaint log to expediently identify individual complaints that may be linked to a single source food-borne disease outbreak.
3. Initiate a food safety investigation within 4 hours notification of any suspected food-borne disease outbreak.
4. Communicate all reports of suspected and/or confirmed food-related illnesses to the Communicable Disease staff to assure that an appropriate epidemiologic investigation is initiated.

## **Objective 44**

Educate food service operators and personnel in safe food handling practices and sanitation.

### **Activities**

1. Conduct Person-in-Charge training sessions on-site during all new and change of owner facilities within the first 6 months of operation, preferably prior to their first regularly scheduled routine inspection.
2. Conduct a minimum of 30 on-site food safety training sessions for food handlers at facilities with marginal sanitation history, those facilities where food handlers exhibit insufficient food safety knowledge.
3. Promote and advise food service operators about the availability of food employee certification courses required by 3 Pa. C.S.A. §§ 6503.
4. Assure the continued distribution of instructional posters (e.g., manual dishwashing poster), food safety education materials and regulatory updates to all licensed operators in their primary language whenever possible.
5. Assess essential food safety practices during routine inspections to evaluate the level of food safety knowledge of food service facility managers and persons-in-charge.
5. Promote and conduct 6 Person-In-Charge training seminars open to all City food facilities on a voluntary basis.
7. Create an email group, updated quarterly, to be utilized for notification of emergency advisories (boil water, power outages, etc.), local food safety training opportunities, technologies, food advisories and recalls, and other pertinent information to all food service establishments.

## **Objective 45**

Conduct public awareness activities about safe food handling practices.

### **Activities**

1. Continue to distribute appropriate signs to promote handwashing for use in public restrooms of food service establishments.
2. Increase awareness of safe food handling practices by updating consumer and food industry information and resources on the City's website.

3. Explore funding opportunities which may assist in the delivery of the food safety messages to the community.

**Program Evaluation:**

All permanent and temporary food service establishments will be operated in a state of compliance with the applicable food service laws and regulations to reduce the risk to the public of food-borne illness during 2020. All permanent and temporary food service establishments will be inspected in 2020. Investigate all incidents of reported food-borne illnesses. Investigate all food service establishment-related complaints in 2020.

## **ENVIRONMENTAL CONTROL PROGRAM**

### **Overview**

The Environmental Control Program addresses the following environmental health issues:

- Housing Hygiene and Sanitation
- Lead Source Reduction
- Vector Control
- Noise Control
- Indoor Air Quality/Asthma
- On-Lot Sewage Disposal
- Pollution Incident Response
- Other Public Health Nuisances

The Environmental Control Program investigates not only traditional environmental health problems such as vector control, housing hygiene and sanitation issues, but also responds to emerging environmental health hazards which were previously underestimated or unrecognized. These hazards include sources of lead exposure, excessive noise, West Nile virus and indoor air quality concerns. Additionally, referrals for *Safe and Healthy Homes* environmental assessments for eligible residents are offered, providing consultative services and supplies where appropriate to address household environmental conditions that may have an adverse effect, particularly to children. And, while not traditionally considered vectors, bed bug infestations are investigated, and where possible, remediation is enforced.

This program primarily serves the community by conducting field investigations in response to complaints of a variety of public health-related nuisances. The goal of each investigation conducted by the staff Sanitarians is to reduce health risks through problem resolution, enforcement action or referral to the appropriate agency. Consultative services are available to the public for a variety of other environmental health issues, such as indoor air quality (IAQ), radon, and asbestos. The Sanitarian staff works closely with Housing Inspectors of the Bureau of Building Standards and Safety to address certain health-related complaints involving property.

Investigations limited to the 'Discovery' and 'Notification' phases are initiated in response to reports or complaints about environmental pollution incidents of air, soil or water, and the improper storage or disposal of toxic or hazardous materials. These preliminary investigations typically result in a referral to the Allentown Fire Department, Lehigh County Emergency Management, PA DEP, US EPA or other agency for appropriate action.

Although nearly all properties in the City are connected to the public water supply and sewage systems, a Sewage Enforcement Officer is available through the City's Water Resources Department to review applications and issue permits for the construction of

new on-lot sewage disposal systems and the repair of existing systems which malfunction. Awareness and educational activities are conducted and coordinated with services to protect the public health by the reduction or elimination of hazardous environmental conditions.

**Program Goal:**

Seek to eliminate or reduce the environmental factors or conditions present in the community which have been identified as potential threats to human health through the enforcement of applicable laws, codes and regulations and the education of the public at large.

**2020 Environmental Control Program Objectives**

**Objective 46**

Investigate and successfully abate all complaints regarding housing sanitation, public health nuisances and vector control in a timely manner.

**Activities**

1. Coordinate cleanup activities and enforcement actions with the appropriate Lehigh County social service agencies (i.e., Agency on Aging, Children and Youth, MH/MR, etc.) to satisfactorily address unsanitary housing complaints involving dysfunctional families or individuals.
2. Investigate, or refer to the appropriate agency, all public health nuisance complaints received and assure their timely and satisfactory abatement.
3. Assure the review, revision, if necessary, and maintenance of an interdepartmental agreement with the city's Bureau of Building Standards and Safety and the SWEEP program to assure the City's adequate response to public nuisance complaints.
4. Investigate rodent sightings and conduct rodent surveys as needed; implement intervention strategies (i.e., public information campaigns, rodent harborage and food source elimination, etc.) or enforcement action where required.
5. Investigate reports of bed bug infestations, consulting with residents and property owners on control measures, and taking enforcement action where warranted to eliminate infestations.
6. Coordinate with the City's Office of Compliance to respond as appropriate to water shut offs to residences and regulated facilities.

### **Objective 47**

Utilize Tyler Eden CE Case complaint software to maintain digital records of all complaints received and investigated.

#### **Activities**

1. Facilitate technical support to Eden CE Case to provide for the administrative and field utilization needs of AHB complaint response activities; assure training for all environmental health staff in its use.
2. Assure continued use of compatible support documents on tablet PC's.
3. Utilize Eden CE Case functions to reduce paperwork and archive relevant documents.

### **Objective 48**

Conduct appropriate actions to control the potential spread of mosquito-borne diseases including Zika Virus and West Nile virus in the City.

#### **Activities**

1. Investigate all mosquito-related complaints and assure their timely and satisfactory abatement.
2. Aid the Lehigh County West Nile Virus Program to identify and reduce or eliminate potential mosquito breeding sites in the City as grant funding permits.
3. Train staff and maintain necessary certifications (e.g., pesticide applicator's license, etc.) to enable staff to provide appropriate mosquito control activities.

### **Objective 49**

Assure that all dwelling units or other structures occupied or frequented by children diagnosed with elevated blood lead levels (EBL) undergo appropriate lead hazard risk assessment and hazard controls in accordance with HUD grant guidelines and/or City ordinance.

#### **Activities**

1. Assure that at least three sanitarians maintain or acquire necessary training and remain competent in the use of an x-ray fluorescence device used to determine lead levels present on painted surfaces.

2. Assure that at least three sanitarians maintain state-issued certification in the performance of lead inspections and lead risk assessments and that all such inspections and assessments are conducted by a certified individual in accordance with established standards.
3. Assure that all dwelling units or other structures occupied or frequented by children diagnosed with elevated blood lead levels (EBL) of 20µg/dl and above or chronically above 15µg/dl (or as otherwise determined by CDC guidelines) undergo appropriate lead hazard risk assessment within 15 days of Health Bureau notification.
4. Monitor lead hazard reduction projects ordered by this Bureau to assure they are completed in compliance with the applicable state and federal regulations and guidelines.
5. Prosecute the owners of any property who fail to complete lead hazard reduction projects in accordance with all applicable standards.
6. Coordinate with the Bureau of Building Standards and Safety to identify and refer eligible properties where a child with an EBL of 20µg/dl and above or chronically above 15µg/dl (or as otherwise determined by CDC guidelines) resides or frequents for grant funding through a HUD Lead Hazard Control Grant to remediate lead hazards in homes in specified target areas.

### **Objective 50**

Investigate and abate, in a timely manner, all commercial and industrial noise-related complaints.

### **Activities**

1. Investigate or refer to the appropriate agency (OSHA, Allentown Police Department) all commercial and industrial sites which create noise resulting in complaints from the surrounding community and assure their satisfactory abatement.
2. Assure the continued competency of the Sanitarians in noise measurement by conducting an in-service training session to review noise investigation protocols and policy; assure that at least one Sanitarian maintains certification as a Noise Technician and receives required continuing education.

### **Objective 51**

Provide the public with a local resource for information about radon and promote radon testing awareness.

#### **Activities**

1. Promote radon awareness and testing using local media and through participation at local health fairs and similar events.
2. Provide information and materials about radon and radon testing in response to inquiries.

### **Objective 52**

Investigate all reported indoor air pollution complaints and educate City residents about the relationship between indoor air quality (IAQ) and asthma.

#### **Activities**

1. Acquire current training in the NEHA Healthy Homes Specialist Credential curriculum for environmental staff not previously trained/certified.
2. Provide consultative services to the public about common indoor air pollutants and problems and suggest potential solutions to the public.
3. Distribute environmental asthma triggers information to the public when investigating complaints in which indoor air quality is an issue.
4. Assure that all Health Bureau outreach workers are knowledgeable about environmental asthma triggers to enable them to educate clients about asthma prevention during home visits.
5. Provide consultative services to the administrative and custodial personnel of institutional facilities about IAQ issues in their facilities.
6. Evaluate IAQ/environmental asthma triggers as part of all annual inspections of regulated institutional facilities (e.g., schools, childcare facilities, nursing homes).



### **Objective 53**

Assure that all reported air, water, and soil pollution incidents are referred to the appropriate emergency management agency in a timely fashion.

#### **Activities**

1. Immediately forward all air, water and soil pollution reports to the appropriate municipal, county, state or federal emergency response agency of any condition discovered to be potentially harmful to the environment or to the human population.

### **Objective 54**

Assure all new on-lot sewage system installations in the City are conducted in compliance with current state regulations and that reports of existing system malfunctions are addressed expeditiously.

#### **Activities**

1. Assure the City has continuous availability of a state-certified Sewage Enforcement Officer (SEO) and an alternate SEO who have been certified by the State of Pennsylvania to conduct plan reviews for proposed repairs and new systems, to conduct all necessary field work and evaluations, and to ensure permit compliance.
2. Refer all reported incidents of on-lot sewage system malfunctions to the City's state-certified Sewage Enforcement Officer.
3. Maintain appropriate records and files of all on-lot sewage system permit applications and related documentation.

### **Objective 55**

Maintain standardized environmental control investigation procedures.

#### **Activities**

1. Review and revise, where necessary, each environmental control policy and procedure.
2. Conduct an annual review of all investigation policies and procedure with Sanitarian staff and conduct a minimum of 3 supervised complaint investigations with each Sanitarian; conduct supervisory review of randomly selected investigation reports for completeness and adherence to policy.

3. Assure the biweekly supervisory review of all complaints which are open (“Working” status in Eden CE Case) to assure a timely resolution.
4. Maintain a computer file of all complaint investigations and assure prompt and accurate data entry of all enforcement activities.

### **Objective 56**

Increase staff awareness of new information about existing and emerging environmental health issues.

#### **Activities**

1. Assure the timely review of a variety of official agency websites (e.g., NIOSH, EPA, etc.) and all environmental health periodicals received for relevant and/or new information about environmental health issues.
2. Assure the distribution to each Sanitarian of all relevant news releases and other communications received from PA DOH, FDA, TSCA, EPA, ATSDR, et al.
3. Conduct weekly staff meetings to serve as a forum for the discussion of new information pertaining to environmental health issues.

### **Program Evaluation:**

Resources will be utilized in the appropriate manner (i.e., investigation, education, referral) to reduce public health risks posed by potentially hazardous environmental conditions throughout the City during 2020. Respond to and address all public health-related nuisance complaints in 2020.

## **INSTITUTIONAL SANITATION AND SAFETY PROGRAM**

### **Overview**

The Institutional Sanitation and Safety Program services include:

- Child Care Facility Inspection and Certification
- Public Bathing Place Inspection
- School Inspection
- Long Term Care Facility Inspection

The Institutional Sanitation and Safety Program fulfills the program requirements of three mandated Act 315 programs. Public bathing places and long-term care facilities are subject to regulations promulgated by the State. Childcare facilities and schools are subject to regulation under the City's Child Care Facility Ordinance and School Ordinance, respectively.

Institutional communities face the same environmental health concerns as any other community since the existence of humans congregating in such facilities introduces the potential for the spread of disease or the occurrence of injury. Problems which may be found in institutions are not limited to safety and sanitation issues but also include indoor air quality concerns, personal health matters (e.g., immunizations) and occupational health hazards (e.g., chemical exposures).

The primary objective of the program's activities in each of the institutional settings is to protect the public from health and safety hazards which could result in illness or unintentional injury. Specific activities include identifying hazards and determining appropriate intervention strategies with facility operators to reduce the risk of injuries and illnesses.

### **Program Goal:**

Assure that the community is provided healthful and safe institutional facilities through regular inspections and operator education.

## **2020 Institutional Sanitation and Safety Program Objectives**

### **Objective 57**

License and inspect all childcare facilities in the City subject to regulation under the City's Child Care Facility Ordinance.

#### **Activities**

1. Inspect all childcare facilities in the City to ensure compliance with sanitation and safety standards.
  - a. All childcare centers shall be inspected at least once annually (51 in 2019).
  - b. All family childcare homes shall be inspected at least once annually (90 in 2019).
  - c. All group childcare homes shall be inspected at least once annually (7 in 2019).
2. Assure that all childcare facilities located in the City of Allentown are licensed or registered by the Pennsylvania Department of Human Services and are certified under the Allentown Child Care Facility Ordinance.
3. Conduct timely re-inspections in non-compliant facilities in accordance with Bureau policy to assure compliance.
4. Assist the Bureau of Building Standards and Safety in the performance of all plan reviews for the construction of all new childcare centers or the alteration of existing facilities.
5. Respond to citizen complaints regarding potentially unsafe conditions and/or practices in each type of childcare facility.
6. Review and revise the childcare inspection policy and procedure.
7. Continue to utilize the new inspection software in Computer Aid Inc.'s PAFoodSafety system.

### **Objective 58**

Inspect all regulated bathing place facilities in the City subject to regulation under the PA State Public Bathing Place Code.

#### **Activities**

1. Inspect all public bathing place facilities in the City to ensure compliance with sanitation and safety standards (24 in 2019).

2. Conduct timely re-inspections in non-compliant facilities in accordance with Bureau policy to assure compliance.
3. Assist the Bureau of Building Standards and Safety in the performance of all plan reviews for the construction of all new public bathing place facilities or the alteration of existing facilities. Coordinate with PA Department of Health to assure the issuance of a PA State Public Bathing Place permit upon final approval of construction for any new public bathing facilities.
4. Respond to citizen complaints regarding potentially unsafe conditions and/or practices in public bathing places.
5. Educate the operators of public bathing places about the requirements of the public bathing place regulations.
6. Conduct safety and sanitation training session for Recreation Bureau employees who oversee the City-owned and operated public bathing places.
7. Continue to utilize the new inspection software in Computer Aid Inc.'s PAFoodSafety system.
8. Review and revise the public bathing place inspection policy and procedure as needed.

### **Objective 59**

Inspect all school facilities in the City subject to regulation under the City's School Sanitation Ordinance.

### **Activities**

1. Conduct a minimum of 1 routine inspection in all public-school facilities in the City to ensure compliance with sanitation and safety standards (26 in 2019).
2. Provide non-regulatory courtesy inspections to private schools as requested (7 in 2019).
3. Conduct timely re-inspections in non-compliant facilities in accordance with Bureau policy to assure compliance.
4. Assist the Bureau of Building Standards and Safety in the performance of all plan reviews for the construction of all new school facilities or the alteration of existing facilities.

5. Perform a risk assessment survey as part of the routine inspection at each playground located on school property to identify hazards and conduct appropriate follow-up with ASD to confirm repairs or the development of plans to address any unsafe equipment or conditions.
6. Respond to citizen complaints regarding potentially unsafe conditions and/or practices in school facilities.
7. Continue to utilize the new inspection software in Computer Aid Inc.'s PAFoodSafety system.
8. Review and revise the school inspection policy and procedure as needed.

### **Objective 60**

Inspect all regulated long-term care facilities in the City subject to regulation under the PA State Long Term Care Facilities regulations.

#### **Activities**

1. Inspect all long-term care facilities in the City to ensure compliance with sanitation and safety standards as found in PA Code Title 28, Chapters 205 and 207 (5 in 2019).
2. Conduct timely re-inspections in non-compliant facilities in accordance with Bureau policy to assure compliance.
3. Respond to citizen complaints regarding potentially unsafe conditions and/or practices in long term care facilities.
4. Continue to utilize the new inspection software in Computer Aid Inc.'s PAFoodSafety system.
5. Review and revise the long-term care facility policy and procedure as needed.

### **Objective 61**

Maintain standardized institutional facility inspection procedures.

#### **Activities**

1. Conduct an annual review session to assure that each Sanitarian is knowledgeable of and adheres to the established policies and protocols for the inspection of childcare facilities, public bathing places, schools and long-term care facilities.

2. Conduct a supervisory review of each completed inspection report to assure staff consistency in the interpretation and documentation of items identified in non-compliance and the required corrections.
3. Provide update training as needed for staff in the inspection of each type of institutional facility and the equipment used in the inspection process.

**Program Evaluation:**

All institutional facilities will be inspected and operated in substantial compliance with all applicable health and safety ordinances and regulations during 2020.

## **INJURY PREVENTION PROGRAM**

### **Overview**

Injury, both intentional (assault, homicide and suicide) and unintentional (accidents), is the leading cause of death, disability and hospital visits for ages 1–44 years old. For all age groups in Allentown, injury is the fourth leading cause of death. From 2012 – 2016 in Allentown there were 132 deaths attributable to motor vehicle accidents or self-harm.

Injury due to falls, is a huge problem– it is the leading cause of unintentional injury in every age group. This issue disproportionately effects seniors and may lead to further injuries, or long-term care needs. The Allentown Health Bureau conducts fall prevention activities, including the Matter of Balance course to help educate seniors and prevent falls.

Residential safety programming focuses primarily on identifying and reducing safety hazards in the homes of children 18 years and younger, homes with pregnant women and the homes of older adults (55 years and older), and adults with physical challenges. AHB also continues to conduct a Shared Bed Risk Reduction initiative which includes a sleeping practices assessment, education for parents on the injury hazards associated with the practice of children sharing a bed with an adult, and the distribution of cribs to families in need.

According to the Poison Prevention Week Council, more than 2 million poisonings are reported each year to Poison Prevention Centers nationwide. Drug overdose deaths have continued to rise in recent years. In Pennsylvania, according to the US Drug Enforcement Administration, overdose deaths rose 8% from 2016 to 2017. AHB will continue to partner with many other agencies to address the current Heroin/Opioid problem within the county and state through a Heroin/Opioid Taskforce and an Overdose Fatality Review Team.

Suicide prevention has been part AHB programming program since the mid-1990s. In Pennsylvania, the suicide rate increased by 34% from 1999 to 2016 and the state's suicide rate of 16.3 per 100,000 people was higher than the national average of 15.4 per 100,000 people. According to PADOH there were 1,960 suicides in Pennsylvania in 2016.

The Safe Kids Allentown-Bethlehem-Easton Coalition, a local affiliate of Safe Kids Worldwide, is a multi-agency organization led by the Allentown Health Bureau and dedicated to the reduction of injury deaths in children 19 years and younger. Activities include safety carnivals, safety training, exhibits, distribution of safety devices (e.g., smoke detectors and bicycle helmets), advocacy for legislative and engineering safety initiatives, and data collection.



Recreational safety includes individual and team sports safety, bike safety and water safety education. Program activities include disseminating educational materials on sports safety, engaging organizations who teach recreational safety to connect with recreational programs, and educating coaches, recreation officials, school administrators and teachers, and the general public.

The National Highway Traffic Safety Administration documented 1,233 occupant deaths in 2016, 21% of which were not using a child safety seat. Traffic accidents were the second leading cause of injury death for children aged 1-4 and the leading cause of injury death for children age 5 through 14. Parental clients surveyed by AHB staff indicate that nearly 15% do not have age appropriate car seats for their children and cite cost as a major reason. To address this need AHB distributes car seats purchased with PADOH grant funds to qualified clients.

According to PennDOT's Crash Information Tool, in the City of Allentown in 2016 there were 795 crashes involving individuals 65 and older. In all of Lehigh County in this time period there were 1,374 crashes involving this age group, meaning over 58% of all crashes involving a person 65 or older occurred in the City of Allentown. AHB has implemented the Car Fit program aimed at educating and protecting older drivers.

## **2020 Injury Prevention Program Objectives**

### **Objective 62**

Promote motor vehicle safety to reduce child occupant and senior driver injuries.

#### **Activities**

1. Collaborate with *Operation Safe Ride*; a community-based safety initiative, to increase the availability of car seats to qualified clients who receive injury prevention or maternal and child health services and provide technical assistance on proper installation upon request.
2. Participate in a local child passenger safety check-up event during National Child Passenger Safety Week in September.
3. Assure each Community Health Specialist certified as a Car Seat Technician completes at least 3 car seat installations, including attending one car seat check, and attends required update training opportunities.
4. Distribute 160 convertible car seats to community members utilizing Health Bureau car seat technicians and community partner agencies (Sixth Street Shelter, Vida Nueva, and VNA of St. Luke's Hospital). Contact every car seat recipient by phone 3 months after the issuance to verify continued

proper use and installation; determine whether the car seat was involved with a crash.

5. Ensure that community partner agencies provide AHB contact information to car seat recipients so they can schedule a seat installation if needed.
6. With the help of community partners, schedule and hold at least 4 car seat check-up events in the City of Allentown for individuals in the community to attend.
7. With the help of community partners schedule and help facilitate one Child Passenger Safety Car Seat Technician course and one Update course to enhance and expand child passenger safety to more professionals in Allentown and the Lehigh Valley.
8. AHB will host 4 CarFit events for seniors in the Allentown community to help educate them on safe driving practices for seniors.

### **Objective 63**

Promote safe traveling habits among children and teens specifically aimed at pedestrian and bicycling behavior.

#### **Activities**

1. Work with the Bureau's Safe and Healthy Communities program to promote policies and education based on Safe Routes to Schools (SRTS)
  - a. (See Chronic Disease Objective 12 for related activities)

### **Objective 64**

Reduce pediatric in-home injury due to falls, fires, scald burns, poisonings, chokings, suffocations, drowning and other hazards.

#### **Activities**

1. Serve as chairperson of the Safe Kids Allentown-Bethlehem-Easton Coalition: conduct 6 coalition meetings, coordinate subcommittees, produce reports and keep the members informed through minutes and other news.
2. Conduct a minimum of 100 safe and healthy homes assessments in Allentown and a minimum of 100 safe and healthy homes assessments combined throughout Carbon, Lehigh, Montour, Northampton, Northumberland and Schuylkill counties in the homes of children 0-18 or in homes with pregnant women. Conduct pre and post assessment surveys for all clients, in accordance with safe and healthy homes guidelines.

3. During the safe and healthy homes assessment, provide and explain the use of approved intervention supplies approved by PA Dept. of Health.
4. Refer clients who require additional services or assistance to area agencies including code enforcement, social service organizations and/or home remediation services.
5. Maintain relationships with 20 public community, social service or medical care organizations to provide referrals for safe and healthy home assessments.
6. Coordinate the *Shared Bed Risk Reduction* activities of all health bureau outreach workers to promote safe sleep practice and to assure their clients are educated about the risks of shared family beds in order to prevent “rollover” deaths of infants and young children. Follow-up each of the assessments with clients who receive a crib or have a recorded bed risk behavior to determine their compliance with our recommendations and to develop a quarterly outcome report. Complete semi-annual reports tabulating results and evaluating program procedures. Evaluate data collection and procedures with Clinical Services manager and staff every other month.
7. Provide window falls prevention and safety information explaining the danger of children falling out of windows to landlords of multi-unit homes by census track throughout the city and to 25 child-oriented agencies: issue a news release to the media about this program.
8. Coordinate with building standard to administer the Window Safety program to distribute grant funds to property owners seeking reimbursement for purchase and installation of window opening control devices in their units in the City of Allentown. Ensure all installations are inspected by Building Standards. Once inspected, process the reimbursement to the property owner.
9. Participate in bi-monthly Lehigh County Child Death Review team meetings.

### **Objective 65**

Reduce all senior injuries, with a special focus on fall injuries through the A Matter of Balance (MOB), senior falls prevention presentations and senior home safety surveys.

### **Activities**

1. Conduct recruiting activity as needed in order to maintain a roster of at least 6 certified MOB coaches.

2. Host two training updates for MOB certified coaches and maintain a roster of 6 MOB certified coaches.
3. Conduct at least 6 coach-led MOB programs to reach a minimum of 60 adult participants who are 55 years and older.
4. Observe and evaluate MOB certified coaches using prescribed coach evaluation tools.
5. Collect and input MOB survey materials into Project Enhance data software.
6. Maintain relationships with 20 public community, social service or medical care organizations to provide referrals for home surveys.
7. Conduct safety surveys upon request in the homes of older (55+) or physically challenged adults to identify and eliminate hazards that could lead to injuries, including falls. Attempt to conduct follow-up surveys of all clients (by telephone or in-person visits) to ascertain whether hazards were corrected after the initial survey.
8. Provide and explain the use of safety devices such as emergency contact cards, whistles, bathmats, anti-slip rug pads, and other fall prevention items at all home safety surveys.
9. Provide home modification and vision referrals, as needed, to home safety survey participants.
10. Distribute falls prevention information for seniors at exhibits and presentations.
11. Promote and conduct at least 4 falls prevention presentations for seniors at sites (e.g. senior housing, church and neighborhood groups) throughout the City.
12. Participate in Lehigh County's Elder Abuse Task Force meetings and help facilitate and promote elder abuse education awareness opportunities to Allentown seniors.

## **Objective 66**

Reduce the number of unintentional poisonings and drug overdoses through education and participation in poison and drug prevention initiatives.

### **Activities**

1. Collaborate with the Allentown Police Department, Lehigh County District Attorney's Office and the U.S. Drug Enforcement Administration to promote proper disposal of unwanted medications and to educate the healthcare providers and public regarding the safe use and disposal of medications; conduct two Drug Enforcement Administration-sponsored community drug take back events.
2. Conduct four prescription medication management educational sessions for seniors in a community setting.
3. Conduct safety surveys by request in the homes of older (55+) or physically challenged adults to identify and eliminate hazards that could lead to injuries, including poisonings. Attempt to conduct follow-up surveys of all clients (by telephone or in-person visits) to ascertain whether hazards were corrected after the initial survey.
4. Promote the availability of all medication disposal boxes within the City of Allentown and Lehigh County.
5. Educate parents about the Poison Helpline via the distribution of decals and cabinet safety locks during child home safety surveys.
6. Participate in the Heroin/Opioid Task Force to reduce the number of overdose deaths in the City of Allentown by promoting educational opportunities for community groups and disseminating relevant educational materials.
7. Chair the Allentown Overdose Fatality Review Team to review individual opioid overdose deaths in the City of Allentown.
8. Provide a minimum of 8 educational sessions aimed at opioid and pain management awareness to professional groups including end of life professionals and manual laborers.

## **Objective 67**

Collaborate with community partners to increase public awareness about suicide.

### **Activities**

1. Participate in the Lehigh Valley Chapter of the American Foundation for Suicide Prevention (AFSP-LV) Board.
2. Participate in the planning and implementation of AFSP-LV events:
  - the *Out of the Darkness Walk* in October
  - the International Survivors of Suicide Day webcast in November
3. Participate in the community suicide prevention task force to review local suicide rates, current programming, and prevention strategies.
4. Partner with the Lehigh Valley Chapter of the American Foundation for Suicide Prevention (AFSP-LV) to promote, schedule and facilitate 3 “Talk Saves Lives” presentations and 3 “More than Sad” presentations aimed at professional groups, community groups and student groups.

## **Objective 68**

Facilitate a comprehensive child maltreatment prevention program utilizing “Parents in the Know” classes.

### **Activities**

1. Ensure that all Maternal and Child Health (MCH) and Injury Prevention (IP) staff will receive child abuse mandatory reporting training as new hires and receive updates annually.
2. Train relevant AHB staff in the “Parents in the Know” curriculum and incorporate violence against children prevention education and awareness component into all MCH & IP client encounters.
3. Co-facilitate 2 “Parents in the Know” classes in Allentown with the Crime Victims Council of the Lehigh Valley, reaching a minimum of 20 individuals per year.

## **Objective 69**

Provide training for the injury prevention staff and promote workplace Health Bureau staff safety.

### **Activities**

1. Review, revise or devise as needed policy and procedure protocols for all aspects of injury prevention programming (safe sleep, car seats, SHHP activities, etc.)
2. Assure that each AHB staff member who conducts injury prevention-related program activity has been trained in all injury prevention policies and procedures.
3. Participate in scheduled meetings and conference calls in relation to the SHC grant, SHHP grant and the Safe Kids coalition.
4. Injury prevention staff shall participate in at least 1 injury prevention webinar quarterly.
5. Injury prevention staff shall attend in-person injury and violence prevention training opportunities dependent on availability and accessibility.
6. Maintain email or mail notification subscriptions to organizations that provide injury-related news, recalls and research.
7. Accurately compile and record all staff training acquired during the year.
8. Maintain membership in the Safe State Alliance and submit an abstract on one of AHB's measurably successful injury prevention programs for their annual meeting; attend the annual meeting.
9. Review and update as needed, the Alliance Hall Emergency Plan.
10. Coordinate efforts with the City Safety Compliance Officer to ensure a safe workplace and to provide worker safety training (e.g., crime avoidance for outreach workers).
11. Conduct semi-annual evacuation drills at Alliance Hall.

## **Objective 70**

Improve program management through enhanced data collection and standardization of work.

### **Activities**

1. Hold monthly staff meetings with Injury Prevention staff
2. Assure the quarterly review of all program activities to assure compliance with annual program plan objectives.
3. Assess the competency and effectiveness of field staff in relating to their clients through a client satisfaction survey of 5% of all survey participants.
4. Conduct a supervisory review of completed home safety surveys to assure staff consistency and competency in the interpretation and documentation of hazards and the corrective actions required for compliance.
5. Conduct a minimum of 1 supervised in-home safety surveys and 2 community presentations with each Community Health Specialist.
6. Review and revise the home safety survey check lists as needed to ensure the inclusion of newly identified home hazards.

### **Program Evaluation:**

Each request for home injury prevention services will be met, public education campaigns will be conducted, and violence prevention and partnering advocacies will be further developed.



## **PUBLIC HEALTH EMERGENCY PREPAREDNESS**

### **Overview**

The Allentown Health Bureau (AHB) fulfills an important role in all-hazards emergency preparedness and response. The Public Health Emergency Preparedness (PHEP) Program coordinates preparedness and response planning, training and exercise development, and facilitates the City of Allentown's (City) response and recovery activities to the public health and medical consequences of natural or man-made disasters and emergencies.

The PHEP Program is responsible for maintaining an All-Hazards Public Health Emergency Response Plan (PHERP). The PHERP is designed to guide the AHB in determining the type and nature of its response as an agency when a public health emergency occurs. The plan provides guidance to the AHB in its responsibilities in areas including but not limited to surveillance, investigation, public information dissemination, disease investigation and collaboration with other agencies. The goal of the PHERP is to protect and maintain the public's health, and to reduce the incidence of morbidity and mortality in the event of a public health emergency.

Since public health threats are always present, AHB's ability to prevent, respond to and recover from public health threats is vital for protecting our community's health. The PHEP Program uses the 15 public health preparedness capabilities identified by the Centers for Disease Control (CDC) as the guiding principles for local preparedness and response to multiple public health threats including infectious diseases, natural disasters, and biological, chemical, nuclear and radiological events.

Citizen preparedness is an important component of a community's resiliency. AHB maintains a robust Allentown Volunteer Medical Reserve Corps (AVMRC), a group of medical and non-medical volunteers who are available to assist with the public health response and recovery. In addition, AHB collaborates with City, county, local, regional and state emergency preparedness and response partners, and engages subject matter experts to plan and implement preparedness initiatives for public health staff, volunteers and community members. Through presentations, awareness campaigns, trainings and exercises the four (4) components to be ready for an emergency are addressed on an ongoing basis. The four components are: be informed, make a plan, build an emergency supply kit, and get involved by finding opportunities to support community preparedness.

### **Program Goal**

Build, maintain and strengthen the ability of public health staff, volunteers and community partners to work both independently and collaboratively to reduce the incidence of morbidity and mortality from public health threats, and prepare for, respond to and recover from emergencies.

## **Objective 71**

Prepare for public health emergencies through coordinated efforts with local, regional and state partners.

### **Activities:**

1. Complete and submit to Pennsylvania Department of Health (PA DOH) a Capabilities Planning Guide Assessment.
2. Utilize Project Public Health Ready (PPHR) guidance to review and update the City's All-Hazards PHERP and Annexes. Provide the plan to PADOH, if requested.
3. Respond to requests for assistance made by local emergency management organizations and/or state government, by providing staff, volunteers, equipment, and supplies, when available and as needed.
4. Attend 100% of the PADOH Statewide Advisory Committee for Preparedness (SACP) meetings.
5. Participate in all PA DOH-Bureau of Public Health Preparedness (BPHP) monthly county and municipal health department conference calls.
6. Conduct a training needs assessment for emergency preparedness staff and AVMRC volunteers.
7. Review, update, and implement the multi-year training and exercise plan (MYTEP) and submit to PADOH.
8. Prepare an HSEEP compliant After-Action Report (AAR) and Improvement Plan (IP) within 60 days of each functional or full-scale exercise, or event.
9. Incorporate at least one lesson learned from each AAR into the AHB's updated All-Hazards PHERP
10. Maintain a minimum of two (2) staff registered on the Pennsylvania Health Alert Network (PA HAN).
11. Work in partnership with the jurisdictional Health Care Coalition (HCC) by maintaining active membership and participating in joint trainings and exercise.
12. Attend PHEP related conferences, meetings and training sessions as deemed appropriate and approved in advance and in writing by PADOH.

## **Objective 72**

Build and sustain the 15 PHEP capabilities as outlined by the CDC's Public Health Preparedness Capabilities, Standards for State and Local Planning.

### **Activities:**

#### **1. Community Preparedness**

- a. Participate in local public health and emergency preparedness and response activities.
- b. Participate in meetings with public health, emergency preparedness/response, healthcare and community partners to build local response coordination and communication capabilities and build upon the community's ability to prepare for, withstand and recover from public health incidents, and natural and manmade emergencies. Meetings include but are not limited to:
  - i. AHB-PHEP;
  - ii. Lehigh County Citizen Corps;
  - iii. Northeast Pennsylvania (NEPA) HCC, which also serves as the Health, Medical and EMS Sub-Committee of the Northeast Pennsylvania Regional Counter Terrorism Task Force (NECTTF);
  - iv. NEPA-HCC Southern Zone;
  - v. Voluntary Organizations Active in Disasters (VOAD).
- c. Meet with the City of Allentown and Lehigh County emergency management teams to coordinate efforts and ensure that all community preparedness activities are coordinated and deliver a unified message.
- d. Promote citizen preparedness via education, media campaigns, and targeted outreach.
- e. Collaborate with the Lehigh County Office of Emergency Management Agency (LCEMA) staff to offer Community Emergency Response Training (CERT) to interested citizens.
- f. Collaborate with LCEMA and emergency response partners to conduct preparedness education at workplace and community settings.
- g. Identify and engage community groups, faith-based organizations, professional organizations, and mental/behavioral health service agencies to build partnerships that support public health and emergency preparedness, response and/or recovery efforts.
- h. Promote available trainings to community partners that may have a supporting role to public health, medical, and mental/behavioral health

sectors (e.g., education, childcare, juvenile justice, child welfare, and congregate childcare settings).

## 2. Community Recovery

- a. Review the contact lists of the community groups, faith-based organizations, professional organizations, and mental/behavioral health service agencies that want to work in partnership on recovery planning and implementing recovery plans.
- b. In conjunction with emergency response partners, convene a meeting with organizations and agencies to discuss the local recovery plans.
- c. Collaborate with recovery lead jurisdictional agencies and recovery partners to review and update the Recovery Annex in the PHERP to ensure that the jurisdiction can provide health services needed to recover from a physical or mental/behavioral injury, illness, or exposure sustained as a result of the incident, with particular attention to the functional needs of at-risk persons (e.g., those displaced from their usual residence).
- d. Maintain opportunities for mental/behavioral health training in the annual staff and volunteer training plan (e.g., grief counseling services).

## 3. Emergency Operations Coordination

- a. Collaborate with the City's Emergency Management Coordinator to update contact information for key response personnel and to discuss any events which could result in protocol changes.
- b. Meet with new staff to review AHB's Standard Operating Procedures, Continuity of Operation Plan, and Emergency Operations Plan to ensure that public health staff understand their potential roles, if any, during a public health response.
- c. Provide training opportunities and the ability to demonstrate continuity of operations through participation in exercises and/or real-world events.
- d. Maintain a minimum of two staff members that are trained to lead exercises in accordance with Homeland Security Exercise and Evaluation (HSEEP) policies and procedures, and has completed IS-120a: An Introduction to Exercises, IS-130: Exercise Evaluation and Improvement Planning, and IS-139: Exercise Design.

## 4. Emergency Public Information and Warning

- a. Assure emergency public information and warning procedures are established to coordinate and disseminate information, alerts, warnings and notifications to the public.

- b. Assure the availability, training and proficiency of the City's public information officer regarding public health emergencies.
- c. Collaborate with the LCEMA to promote CodeRED, the LCEMA emergency alert notification system.
- d. Review and update the Lehigh County Health Information Center (LCHIC) Plan.
- e. Conduct a minimum of one orientation on AHB's Communication Plan (Annex L) for new public health staff and volunteers.
- f. Collaborate with community partners to develop, implement and evaluate a communications drill utilizing the AHB's Communications Plan (Annex L) and the Continuity of Operations Plan (Annex V).
- g. Maintain staff that are proficient in Knowledge Center- Healthcare Incident Management System (KC-HIMS) and Knowledge Center- Incident Command (KC-IC).
- h. Utilize the City's website and social media to promote public health messaging.
- i. Provide opportunities for staff with public information responsibilities to complete training and through participation in exercises and/or real-world events demonstrate their abilities to serve as public information officer.
- j. Collaborate with NEPA-HCC and the community's Joint Information Center to develop and maintain a plan that information is accurate, consistent, linguistically and culturally appropriate, and disseminated to the community using one voice during an emergency.

## 5. Fatality Management

- a. Train new public health staff and AVMRC volunteers the Lehigh County's fatality management plans and procedures and understand their role(s), if any, during a public health response that includes fatalities.

## 6. Information Sharing

- a. Review and update the contact list of community partners a minimum of once per year.
- b. Continue to disseminate information and alerts to community partners.
- c. Participate in PADOH initiated tests of the statewide radio system and Government Emergency Telecommunications Service (GETS).

- d. Maintain AHB staff that are proficient in the use of PA NEDSS, PA-HAN, EPI Center, the radio system, Knowledge Center, SIIS and SERVPA to ensure early disease detection, prompt disease investigation and coordinated disease control and emergency response efforts.
- e. Participate in planning to develop an information sharing plan for conducting multijurisdictional, multidisciplinary exchange of health-related information and situational awareness data among federal, state, local levels of government and the private sector which includes identifying stakeholders, developing rules and establishing data elements for sharing.
- f. Offer awareness-level trainings regarding media operations for AHB staff and AVRMC volunteers.

## 7. Mass Care

- a. Collaborate with LCEMA, the American Red Cross and local emergency response partners to review and update, as needed, the Mass Care and Sheltering Plan for our community.
- b. Collaborate with City officials, LCEMA, the American Red Cross and local partners to identify and coordinate a minimum of one training on shelter operations for public health staff, partners and volunteers.
- c. Attend or receive updates from the Hospital Preparedness committee and ensure that public health preparedness plans are compatible with hospital response plans.

## 8. Medical Countermeasure Dispensing

- a. Review the sites selected for City of Allentown Points of Dispensing (PODs); maintain or revise the POD plan, as needed.
- b. Continue to educate staff and volunteers affiliated with AVMRC and LC CERT, about procurement, management, and mass distribution of supplies and medications.
- c. Conduct one full-scale or functional exercise, which tests key components of the City's mass prophylaxis/dispensing plans and includes all pertinent jurisdictional leadership and emergency support function leads, planning and operational staff, and other applicable personnel.
- d. Complete the three drills listed below and provide reports to the PADOH-BPHP on the drills using the CDC-required drill forms provided by the Department.
  - i. Personnel Call-Down Drill
  - ii. Site Activation Drill

iii. Facility (POD) Set-Up Drill

- e. Participate in the planning and implementation of Lehigh Valley Health Network's Community Flu Campaign.

9. Medical Material Management and Distribution

- a. Review and update, as needed, the PHEP inventory management system; train personnel when updates are made.
- b. Update the PHEP inventory supply list; order additional supplies as needed.

10. Medical Surge

- a. Conduct recruitment and development activities for Medical Reserve Corps members (MRC) and give priority to those exercises or opportunities which bring volunteers together with a broad range of responders.

11. Non-Pharmaceutical Interventions

- a. Assure that staff complete NPI 101-Introduction to Non-pharmaceutical Interventions (NPI) course.
- b. Inform staff of trainings, exercises and real-world events that enhance their knowledge and ability to implement non-pharmaceutical interventions.

12. Public Health Laboratory Testing

- a. Provide awareness level training opportunities for staff about the role and responsibilities of Public Health Laboratories in the public health system.

13. Public Health Surveillance and Epidemiological Investigation

- a. Conduct routine and incident-specific morbidity and mortality surveillance. Provide updates and prepare reports as requested.
- b. Maintain communications with neighboring jurisdictions and PADOH to discuss trends and encourage open dialogue during emergency and non-emergency situations.
- c. Maintain surveillance systems that can identify health problems, threats, and environmental hazards and responds to (or investigate) reports 24/7.

- d. Participate in conference calls with PADOH-BPHP and Bureau of Epidemiology to monitor, prevent and control infectious disease outbreaks.
- e. Collaborate with other City Bureaus to plan and implement a mosquito and tick bite prevention and control education and awareness campaign.

#### 14. Responder Safety and Health

- a. Review responder safety and health risks and provide appropriate training and personal protective equipment (PPE) and supplies.
- b. Provide Fit testing for AHB staff and volunteers who are required to use N-95 respirators as part of their roles in public health responses.
- c. Provide Hazardous Materials (Hazmat) Awareness training opportunities for public health staff and volunteers.

#### 15. Volunteer Management

- a. Review and update procedures for managing spontaneous volunteers.
- b. Collaborate with jurisdictional authorities and partner groups to review and update community resources that can support volunteer post-deployment medical screening, stress and well-being assessment and, when requested or indicated, referral to medical and mental/behavioral health services.

### **Objective 73**

Utilize the Allentown Volunteer Medical Reserve Corps (AVMRC) to enhance the emergency response capacity by increasing the availability of a trained and skilled workforce of medical and public health professionals and lay volunteers.

#### **Activities:**

##### 1. Overarching

- a. Maintain accurate and up-to-date contact information on the AVMRC Unit in the State Emergency Registry of Volunteers in Pennsylvania (SERVPA), and on the national MRC web site.
- b. Maintain 100% of the total AVMRC Unit membership as registered and accepted within AHB's MRC Unit in SERVPA.
- c. Participate the PADOH MRC conference calls.



## 2. State and Local Coordination

- a. Integrate emergency response training of AVMRC volunteers with other local, state or regional assets, such as EMS, hospitals, community health centers, and long-term care facilities.
- b. Include AVMRC members and personnel from other local, state or regional assets (e.g. EMS, hospitals, community health centers, long-term care facilities and HCC) in community exercises.

## 3. Planning and Response

- a. Conduct a minimum of one AVMRC recruitment activity.

## 4. Training, Education and Exercises

- a. Develop an MRC multi-year training and exercise plan (MYTEP) in collaboration with the HCC.
- b. Conduct a minimum of one standard orientation training for all new AVMRC members, to include SERVPA registration MRC core competencies, roles and responsibilities.
- c. Conduct a minimum of one core competency-based emergency preparedness training session based on the MRC Volunteer Core Competencies and NIMS compliance for all AVMRC members and staff.
- d. Conduct a minimum of one training for AMVRC volunteers on the use of SERVPA, including basic SERVPA skills, messaging, and responding to a mission.
- e. Provide written notice, via SERVPA to the AVMRC members and via email to PA DOH, of training session dates, locations and agenda.
- f. Participate in a minimum of one exercise that utilizes public health emergency scenarios or responds to a real-life public health event utilizing the AVMRC.
- g. Participate in at least one state SERVPA call-down notification drill of all active AVMRC volunteers.
- h. Participate in at least one state SERVPA operational drill of all active AVMRC volunteers.

**Program Evaluation:**

The City's All-Hazards Public Health Emergency Response Plan will be reviewed and updated; and the NIMS plan will be compliant and coordinated with state and city emergency plans. Health Bureau staff and AVMRC volunteers will complete training as identified through a training needs assessment, including trainings, exercises, and drills with focus on preparedness for and response to multiple public health threats. Further evaluation will be accomplished through quarterly measurements of activities throughout 2020.

**2019  
Environmental  
Health  
Services  
Accomplishments**

## **ENVIRONMENTAL HEALTH SERVICES**

### **2019 ACCOMPLISHMENTS BY OBJECTIVE - FOOD PROTECTION**

#### **Objective 36 – Achieved**

License and inspect all food service establishments, including restaurants, bars, markets and other retail food facilities, mobile food units, temporary food stands and potentially hazardous food vending machines.

- 913 food service establishments were inspected including: 1) 631 retail facilities and 25 mobile operators with city issued health licenses; 2) 257 institutional facilities which were licensed by another agency.
- 1030 routine inspections were conducted, including 149 in high risk facilities.
- 501 temporary food service facilities were inspected and approved.
- 3 vending machines retailing potentially hazardous foods were inspected.
- Responded to 3 reported emergencies (e.g., power outages, sewage overflows, flooding), within 4 hours of notification.
- Chart 36.1 below illustrates primary program activities – 2015 through 2019:

Chart 36.1

<b>Activities</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
Food Service Establishments Inspected	900	908	911	884	913
Number of Routine Food Service Establishment Inspections	1250	1160	962	1184	1030
Number of Temporary Food Service Inspections	441	507	436	495	501
Number of Potentially Hazardous Food Vending Machine Inspections	26	26	13	24	5
Number of Plan Reviews Conducted	133	114	107	111	86

### **Objective 37 - Achieved**

Continue to utilize Computer Aid Inc.'s *PAFoodSafety* web application inspection software maintained by agreement with the Pennsylvania Department of Agriculture (PDA), and other software, to enable mobile data management in the field as well as in the office environment.

- Maintained the *PAFoodSafety* inspection system and coordinated system updates through PDA, CAI and the City's IT support.
- Continued use of new tablets capable of running the updated version of CAI's software to generate inspection report narratives in the field.
- Reduced hard copy paperwork for documents available digitally.
- Maintained and updated a food establishment GIS locator program on field staff PC's which can be utilized when responding to emergencies.
- Provided in-house training as needed for all staff on the use of the inspection report narrative form and the GIS Program.
- Maintained an agreement with PA Department of Agriculture for the sharing of inspection software and databases.

### **Objective 38 - Achieved**

Maintain standardized food service plan review, licensing and inspection procedures.

- 86 plan reviews were conducted to assure that food service design criteria, equipment and materials are in compliance with current standards.
- Site checks were conducted during the construction or renovation of food service establishments to assure adherence to the approved plans.
- Inspection reports underwent supervisory review to assure staff consistency in regulation interpretation and documentation.
- Supervised food service inspections were conducted with Sanitarians.
- Peer standardization inspections and trainings were conducted with experienced staff and new hires.
- Maintained a licensing software module as part of the City's "one-stop-shop" permit process.

### **Objective 39 - Achieved**

Enhance staff knowledge of current food safety principles, code interpretations, food recalls and regulations through training opportunities.

- Each Sanitarian attended at least 1 training opportunity off-site or on-line devoted to food safety issues.
- 37 staff meetings were conducted to review current information and introduce new concepts in food protection.
- 2 Sanitarian positions were fully staffed, and 3 new hires were added.

- 3 staff members maintained ServSafe certifications and 3 staff members obtained ServSafe certifications.
- Sanitarians routinely accessed websites for all pertinent FDA, USDA, PDA and DOH food recall notices, alerts and interpretation memos issued.

#### **Objective 40 - Achieved**

Allocate program resources in an efficient manner using food hazard risk assessment.

- A risk analysis utilizing a food safety assessment tool was performed in each new facility and those which underwent a change of ownership to determine the frequency of annual inspections.
- Each existing facility's risk analysis was reviewed for accuracy at the time of inspection and the facility's inspection frequency was adjusted accordingly.

#### **Objective 41 - Achieved**

Maintain efforts to ensure compliance in licensed food service facilities where chronic or severe violations are identified during inspections.

- 129 re-inspections were conducted in facilities with violations to ensure compliance was achieved.
- 3 administrative conferences were conducted with operators of non-compliant establishments.
- 81 facilities received notices of violation as a result of non-compliance; 8 citations were issued for chronic or severe violations.
- 129 food service violation tickets issued to food service establishments in violation of the Food Service Sanitation Ordinance.
- 158 conditional licenses were issued to operators in non-compliance with other City ordinances or regulations; each subsequently complied and was granted an annual license, the facility permanently closed, or legal action was taken.

#### **Objective 42 - Achieved**

Fulfill the obligations for uniform food service regulatory activities consistent with Title 7, Chapter 46 - The Food Code and the most current version of the FDA Model Food Code.

- Submitted all inspection data to PDA via the *PAFoodSafety* inspection system.
- Trained staff in the use of PDA's food regulations Title 7, Chapter 46 – The Food Code.

### **Objective 43 - Achieved**

Maintain a food borne disease surveillance system to appropriately respond to food-related complaints or reports of illnesses attributed to food.

- 129 food-related consumer complaints were investigated.
- 5 cases of potential foodborne illness outbreak cases were reported or determined to have occurred.
- A computer-based food-related complaint log was utilized to identify potential food-borne disease outbreaks.

### **Objective 44 - Achieved**

Educate food service operators and personnel in safe food handling practices and sanitation.

- Conducted 6 Person-In-Charge training seminars; 63 food facility owners and managers from 24 facilities attended these sessions. In addition, Person-in-Charge trainings were conducted at the initial inspection of 29 new or change-of-owner facilities.
- Conducted 20 on-site trainings during inspections for 65 food handlers.
- Conducted a food safety in-service training for 100 school district food employees.
- A variety of posters, flyers and fact sheets regarding food safety issues were distributed to all licensed operators.
- Promoted the availability of Food Service Manager Certification training as required by Act 131 of 1994; promoted compliance with the requirements of the Act, as amended by Act 106.

### **Objective 45 - Achieved**

Conduct public awareness activities about safe food handling practices.

- Continued to distribute to all licensed facilities decals that promote hand washing for placement at all hand sinks.
- Responded to approximately 100 public inquiries about safe food handling.
- Distributed posters notifying the public of food facility inspection report availability at license issuance or renewal.

## **2019 ACCOMPLISHMENTS BY OBJECTIVE - ENVIRONMENTAL CONTROL**

### **Objective 46 - Achieved**

Investigate and successfully abate all complaints regarding housing sanitation, public health nuisance and vector control complaints in a timely manner.

- 200 community health related complaints were investigated and abated.
- Maintained working relationships with social service agencies (e.g., Children and Youth, Area Agency on Aging) to provide assistance in the investigation of problems involving unsanitary housing.
- 20 notices of violation and 2 citations were issued regarding community health nuisances.
- Chart 46.1 below illustrates primary program activities - 2015 through 2019:

Chart 46.1

<b>Complaint Category</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
Community Health Nuisances	292	279	222	210	200
Bed Bug Infestations	97	89	75	50	57
Indoor Air Quality	89	90	64	92	62
Environmental Lead	5	9	10	24	19
WNV Control / Mosquito Harborage	40	59	32	38	36
Total	533	526	403	414	374

### **Objective 47 - Achieved**

Conduct appropriate actions to control the potential spread of West Nile Virus in the City.

- Investigated and abated 36 complaints of mosquito harborage on residential and commercial properties.
- 2 staff members maintained pesticide applicator's license in order to provide mosquito control activities.
- Cooperated with the Lehigh County West Nile Virus program in their efforts to identify and reduce or eliminate potential mosquito breeding sites in salvage yards in the City.



#### **Objective 48 - Achieved**

Assure that all dwelling units or other structures occupied or frequented by children diagnosed with elevated blood lead levels of 20 µg/dl and above or chronically above 15 µg/dl undergo appropriate lead hazard risk assessment within 15 days of Health Bureau notification.

- Maintained risk assessor certification for 2 Sanitarians through appropriate recertification training.
- 59 Family Home Assessments and 19 lead hazard risk assessments were conducted in homes occupied or frequented by children with elevated blood lead levels or were identified by Bureau of Building Standards as child occupied homes eligible for Lead Hazard Control grant funding to remediate lead hazards.
- 19 notices of violation were issued to owners of properties identified with environmental lead hazards.
- 17 lead hazard reduction projects were completed in dwellings which contained lead paint – 15 projects were completed through the grant program and 2 were completed independently by the property owners.
- Coordinated lead inspection and risk assessment activities with the City's Lead Hazard Control program through a HUD Lead Hazard Control Grant.
- Distributed Healthy Homes Toolkits to the families of each residence where an environmental assessment was completed.

#### **Objective 49 - Achieved**

Investigate and abate, in a timely manner, all commercial and industrial noise-related complaints.

- 2 noise-related complaints were investigated and successfully abated.

#### **Objective 50 - Achieved**

Provide the public with a local resource for information about radon and promote radon testing awareness.

- Responded to approximately 100 public inquiries pertaining to radon-related issues.

#### **Objective 51 - Achieved**

Investigate all reported indoor air pollution complaints and educate City residents about the relationship between IAQ and asthma.

- 62 investigations of properties with suspected indoor air quality problems were conducted and abated.

- 3 facilities were inspected for their compliance with the City's cigarette vending ordinance.
- Responded to approximately 150 public inquiries regarding indoor air quality issues or referred callers to other sources of information.
- Distributed environmental asthma triggers information to the public when investigating indoor air quality complaints.

#### **Objective 52 - Achieved**

Assure that all reported air, water and soil pollution incidents are verified and referred to the appropriate municipal, state or federal agency in a timely fashion.

- 1 pollution incident was reported for referral to the appropriate state, local or county emergency response agency.

#### **Objective 53 - Achieved**

Assure all new on-lot sewage system installations in the City are completed in compliance with current state regulations and existing system malfunctions are addressed expeditiously.

- 2 City employees maintained a Sewage Enforcement Officer license to assure prompt response to inquiries about existing and new on-lot sewage systems.
- No new on-lot systems were installed and no existing systems required repair.

#### **Objective 54 - Achieved**

Maintain standardized environmental control investigation procedures.

- Each environmental control policy and procedure received an administrative review and was updated as necessary.
- A minimum of 3 supervised complaint investigations were conducted with each Sanitarian.
- Investigation reports were reviewed for completeness and policy adherence.
- A monthly progress review of each unresolved complaint investigation was conducted; 7 lead complaint investigations remained open at the end of the year.
- All complaint investigation data were entered in a computer data base for tracking purposes.
- Coordinated with the City's IT department to develop new complaint tracking software.

**Objective 55 - Achieved**

Increase staff awareness of new information about existing and emerging environmental health issues.

- 37 staff meetings were conducted to allow for the discussion of environmental health issues, policy clarification and planning purposes. All appropriate information updates were circulated to staff for review.

## **2019 ACCOMPLISHMENTS BY OBJECTIVE - INSTITUTIONAL SANITATION AND SAFETY**

### **Objective 56 - Achieved**

License and inspect all childcare facilities in the City subject to regulation under the City's Child Care Facility Ordinance.

- 153 routine inspections and 40 follow-up inspections were conducted at 153 childcare facilities.
- Investigated 12 complaints regarding unhealthy or unsafe conditions or practices in institutional settings.
- Chart 56.1 below illustrates primary program activities – 2015 through 2019:

Chart 56.1

Type of Facility	Number of Facilities (2019)	Number of Routine Inspections				
		2015	2016	2017	2018	2019
Child Care Facilities*	153	161	156	159	149	153
Public Bathing Places	29	53	41	46	50	28
Public & Private Schools	35	36	35	35	34	33
Long Term Care	5	6	6	6	6	5
School Playgrounds	12	12	12	12	12	12

*\*Child Care Centers, Group and Family Child Care Homes and Other Child Care Facilities*

### **Objective 57 - Achieved**

Inspect all regulated bathing place facilities in the City subject to regulation under the PA State Public Bathing Place Code.

- 28 routine inspections were conducted at 29 public bathing facilities.
- Worked with Computer Aid Inc. (CAI) to develop inspection report software for public bathing place facilities.

### **Objective 58 - Achieved**

Inspect all school facilities in the City subject to regulation under the City's School Sanitation Ordinance.

- 30 routine inspections were conducted in 30 public schools. Courtesy inspections were offered to all private schools; 3 courtesy inspections were conducted upon request.
- 12 school playgrounds were surveyed for safety hazards and subsequently rechecked to determine if repairs were made where necessary.
- Worked with Computer Aid Inc. (CAI) to develop inspection report software for school facilities.

### **Objective 59 - Achieved**

Inspect all regulated long-term care facilities in the City subject to regulation under the PA State Long Term Care Facilities regulations.

- 5 routine inspections were conducted in 5 long term care facilities.

### **Objective 60 - Achieved**

Maintain standardized institutional facility inspection procedures.

- A staff review session of policies and regulations was held for each institution category.
- 223 institutional inspection reports underwent supervisory review to assure staff consistency and standardization in the interpretation and application of regulations.
- Worked with Computer Aid Inc. (CAI) to develop inspection report software for long term care facilities.

## **2019 ACCOMPLISHMENTS BY OBJECTIVE - INJURY PREVENTION**

### **Objective 61 – Achieved**

Promote motor vehicle safety to reduce child occupant and senior driver injuries.

- 209 car seats were distributed and installed by AHB certified CPS technicians.
- 18 car seat vouchers were distributed to needy families through the *Operation Safe Ride Program*.
- 15 grant purchased car seats were distributed through our partnerships with 3 agencies: Center for Women's Medicine, Sixth Street Shelter, Vida Nueva, and VNA of St. Luke's Hospital.
- 209 car seat recipients were contacted for follow-up after they had received a car seat and 138 were successfully reached. Of those, 134 were still using the car seat, 136 had no difficulty reinstalling the seat and 138 used the seat every time they transported their child.
- 45 car seats installed in client vehicles were checked by the Allentown Health Bureau and partners at 5 AHB car seat check events conducted in the City of Allentown including 2 Child Passenger Safety Week check in September 2019.
- One Child Passenger Safety Certification Course was held at North Whitehall Township Bldg. in September 2019 and one Child Passenger Safety Update Course was held at Bucky Boyle Park in May 2019.
- 4 Car Fit events were held with 9 participants.

### **Objective 62 – Achieved**

Promote safe traveling habits among children and teens specifically aimed at pedestrian and bicycling behavior.

- (See Chronic Disease Accomplishments Objective 13 for related reporting.)

### **Objective 63 – Achieved**

Reduce pediatric in-home injuries due to falls, fires, scald burns, poisonings, choking, suffocations, drowning and other hazards.

- 4 meetings of the Safe Kids Allentown-Bethlehem-Easton Safe Kids Coalition were chaired by the Injury Prevention manager in 2019.
- 219 safe & healthy homes assessments were conducted in the City of Allentown as well as in Lehigh, Carbon, Northampton, Northumberland and Schuylkill Counties.

- 45 agency contacts were made to promote the childhood injury prevention program.
- 1,020 parents/caregivers were educated about preventing child injuries through surveys, resurveys, exhibits and displays at public events such as local health fairs.
- 226 bed risk assessments were conducted in homes with children under 2 years old.
- 118 portable cribs were distributed to families to promote safe sleep for young children.
- Rechecks were attempted for each client who had received a crib and/or had a hazardous bed risk behavior noted at the initial bed risk assessment. Of those attempts, 112 follow-up surveys were successfully performed by the end of the year with 89 clients reported they were still using the crib and/or had corrected their hazardous bed risk behavior.
- Information was provided to agencies and groups associated with housing, childcare and injury prevention and advising about the dangers of children falling out of windows. "Kids Can't Fly" brochures containing window safety information were distributed in response to requests from landlords and social service agencies.
- 5,223 varied home safety supplies were given at healthy homes assessments including 174 smoke detectors and 202 carbon monoxide detectors.
- Educated home safety survey clients and the public at-large about these issues: falls, the poison control hotline, Fight BAC! Food safety materials and proper storage of household cleaners, medications and other poisonous substances and child maltreatment issues.
- Attended 4 Lehigh County Child Death Review team meetings.

#### **Objective 64 – Achieved**

Decrease the prevalence and risk factors for traumatic brain injury through the promotion of concussion education and resources to non-school related youth athletics organizations in Allentown.

- 2 AHB and 1 Allentown Recreation staff are trained as Concussion Wise trainers.
- 4 Brain Steps meetings were attended by AHB staff.
- 10 Concussion Wise presentations were held for 83 participants.

#### **Objective 65 – Achieved**

Reduce senior fall injuries through the A Matter of Balance course, Stopping Elderly Accidents, Deaths and Injuries (STEADI) Program, senior falls prevention presentations and senior home safety surveys.

- Bureau volunteer coaches conducted nine 8-week *A Matter of Balance*

- (MOB) classes; a total of 60 senior citizens completed these classes.
- 2 new volunteer MOB coaches were trained and certified.
- 4 older adult injury prevention presentations emphasizing falls prevention were made to community groups and at senior centers; a total of 64 people attended these presentations.
- 19 home safety surveys were conducted for older adults; 19 follow-ups were conducted.
- 803 older adults were educated about preventing injuries through presentations, surveys, exhibits, and displays at public events such as local health fairs.

### **Objective 66 – Achieved**

Reduce the number of unintentional poisonings and drug overdoses through education and participation in poison and drug prevention initiatives.

- The Health Bureau partnered with the Allentown Police Department, Lehigh County District Attorney's Office and the Drug Enforcement Administration to staff Prescription Drug Take Back sites to collect old, unwanted, expired, or unused pharmaceutical controlled substances and other medications; four events were held.
  - On 4/27/2019 AHB staffed National Drug Take Back Events at the Giant Supermarket and the CVS in Allentown. Prescription drug safety information was disseminated and 346lbs of medication was collected.
  - On AHB staffed National Drug Take Back Events at the Giant Supermarket, Wegman's and the CVS in Allentown. Prescription drug safety information was disseminated and 241lbs of medication was collected.
- 2 new releases were issued prior to each Drug Take Back event.
- Poison prevention materials were distributed to Safe Kids Coalition Partners at their November meeting.
- Conducted 6 poison prevention presentations at day cares & early learning centers
- Conducted 4 poison prevention presentations to 64 seniors.
- AHB chaired and participated in 6 Heroin/Opioid Allentown Taskforce meetings in 2019. These meetings were attended by area agencies that practice substance abuse prevention and treatment, area health systems as well as Allentown law enforcement, Allentown EMS, the Lehigh County Coroner and area hospitals.



### **Objective 67 – Achieved**

Collaborate with community partners to increase public awareness about suicide and violence prevention.

- Allentown Health Bureau partnered with local organizations to develop and implement strategies to reduce suicides and to review suicide data. Partners include representatives from Lehigh County Mental Health, Lehigh County Drug and Alcohol, the Lehigh County Coroner, Pinebrook Family Answers and other community organizations.
- During 2019, the community suicide prevention task force reviewed local suicide rates, local programming and analyzed suicide prevention strategies.
- AHB's Associate Director for Personal Health Services is a member of the Lehigh Valley Chapter of the American Foundation for Suicide Prevention (AFSP-LV) which met routinely throughout 2019.
- AHB participated in the planning and implementation of AFSP-LV events:
  - The October 23, 2019 Out of the Darkness Walk was a success with over 1,500 participants and raised over \$140,000; the event was well-covered by the media.
  - The Greater Lehigh Valley International Survivors of Suicide Day event was held on November 23<sup>rd</sup> at Lehigh Valley Health Network Muhlenberg campus; following the webcast, there was a lengthy discussion among survivors of suicide loss.

### **Objective 68 – Achieved**

Facilitate a comprehensive child maltreatment prevention program utilizing “Parents in the Know” classes.

- 4 Parents in the Know classes were held in Allentown with 70 participants.
- Three new staff persons were trained on the PA mandated reporting child abuse law. All AHB staff are trained as on the law.

### **Objective 69 – Achieved**

Provide training for the injury prevention staff and promote workplace Health Bureau staff safety.

- The IP Manager participated in 4 state-wide SHC conference calls.
- Injury Prevention staff participated in 5 injury prevention webinars and 3 in-person injury prevention trainings.
- The program manager attended the 2019 annual meeting of the Safe States Alliance and gave a presentation entitled A Matter of Balance: Analysis of Local Program Outcomes.
- The Alliance Hall Emergency Plan was reviewed and updated; one building-wide fire drill was conducted

- AHB was successful in renewing one grant (Bed Risk Reduction) to financially support our ongoing programming.

**Objective 70 – Achieved**

Improve program management through enhanced data collection and standardization of child and older adult safety survey procedures.

- Program plans were reviewed on a quarterly basis to assure progress toward completion.
- A quarterly sampling of completed home safety forms surveys was reviewed and critiqued with the community health specialist.
- All injury prevention policies and procedures were reviewed.
- Tablets utilizing the ArcGIS data collection system and the Survey123 were implemented for home safety visits and safe sleep visits.

## **2019 ACCOMPLISHMENTS BY OBJECTIVES**

### **PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP)**

#### **Objective 71 - Achieved**

Prepare for public health emergencies through coordinated efforts with local, regional and state partners.

- Completed and submitted the Capabilities Planning Guide Assessment to Pennsylvania Department of Health (PADOH).
- Review and updated the City's All-Hazards Public Health Emergency Response Plan (PHERP).
- Received and responded to 2 requests for assistance by deploying public health staff, volunteers and supplies to the emergency responses.
- Attended the 2 PADOH Statewide Advisory Committee for Preparedness (SACP) meetings.
- Participated in all PADOH - Bureau of Public Health Preparedness (BPHP) monthly county and municipal health department conference calls.
- Maintained active membership in the 8 county Northeast Pennsylvania Health Care Coalition (NEPA-HCC), which also serves as the Health, Medical and EMS Committee of the Northeast Pennsylvania Regional Counter Terrorism Task Force (NECTTF).
- Maintained active membership in the NEPA-HCC Southern Zone committee, consisting of healthcare agencies within the 4 southern counties in the NEPA-HCC.
- Reviewed, updated and submitted to PADOH the 2019-2023 multi-year training and exercise plan (MYTEP).
- Maintained 8 staff registered on the Pennsylvania Health Alert Network (PA HAN).
- Public health staff and volunteers attended 11 PHEP related conferences, meetings and trainings.
- Submitted semi-annual reports to PADOH regarding AHB activities, meetings, trainings, exercises, drills and emergency responses.

#### **Objective 72 - Achieved**

Build and sustain the 15 PHEP capabilities as outlined by the CDC's Public Health Preparedness Capabilities, Standards for State and Local Planning.

##### **1. Community Preparedness**

- 1 AHB staff attended the House of Worship Safety and Security Seminar.
- 4 AHB staff and the City Solicitor attended the CDC's Public Health Emergency Law training.

- 2 AHB staff completed G205 - Recovery From Disaster: The Local Government Role.
- 2 AHB staff completed G317 - CERT Train-the-Trainer.
- 1 AHB staff completed L146 - Homeland Security Exercise & Evaluation Program (HSEEP).
- 1 AHB staff completed G290 - Public Information Officer.
- 2 AHB staff attended the 2019 Annual Anti-Terrorism Advisory Council (ATAC) Conference.
- 1 AHB staff attended the Public Health Regional Volunteer Response Workshop.
- 1 AHB staff attended the Pennsylvania Department of Human Service Functional Assessment Service Team (FAST) training.
- 1 AHB staff completed the Health Care Leadership & Integrated Capstone Event at Center for Domestic Preparedness.
- Participated in the bi-monthly Lehigh County Citizen Corps meetings with community partners to plan and implement emergency preparedness educations, community events and awareness campaigns.
- Participated in the quarterly Northeast Pennsylvania Health Care Coalition (NEPA-HCC) meetings with regional health care, public and private partners. The NEPA-HCC also serves as the Health, Medical and EMS Committee of the Northeast Pennsylvania Regional Counter Terrorism Task Force (NERCTTF).
- Participated in the quarterly NEPA-HCC Southern Zone meetings with health care, medical, EMS, public and private partners from the 4 southern counties in the NEPA-HCC including Lehigh, Northampton, Carbon and Monroe Counties.
- Participated in the quarterly Northeast Pennsylvania Voluntary Organizations Active in Disaster (NEPA VOAD) meetings with faith-based, community-based, and other nonprofit, non-governmental organizations (NGOs) and government agencies who have volunteers that are available to assist communities recover when affected by a disaster.
- Participated in the meetings with the Lehigh Valley Health Network (LVHN) Community Flu Campaign planning committee.
- Participated in the quarterly Lehigh Valley Immunization Coalition meetings and collaborated with Coalition partners to promote immunizations.
- Participated in Allentown EMA meetings to plan efforts and ensure that all community preparedness activities are coordinated to deliver a unified message.
- Participated in quarterly Lehigh County Emergency Management meetings with the municipal EMCs and members of their respective EMC teams.
- Assisted Lehigh County Office of Emergency Management (LCEMA) with the implementation of 2 CERT (Community Emergency Response Team) training courses; 41 community members completed the training.
- Collaborated with LCEMA and Allentown EMC to conduct 8 emergency preparedness educations; over 121 individuals were educated.

- Collaborated with Allentown EMC during an employee wellness event to promote the importance of personal preparedness, developing family emergency plans, and preparing disaster supply kits.
- Collaborated with Allentown EMC and 3 AVMRC volunteers to promote to City employees the importance of family disaster planning, packing and maintaining emergency “grab & go” bags and vehicle preparedness kits.
- Collaborated with Allentown EMC and a Fire Captain to conduct an emergency preparedness education; 242 individuals were educated.
- Collaborated with Allentown Fire, Police & EMS and LCEMA to plan and implement 2 City of Allentown PrepareAthon events where 35 families (35 adults and 79 children) participated in interactive stations to learn how to prepare for and respond to emergency situations.
- In conjunction with Allentown EMC, Fire, Police and EMS met with 4 agencies, and as requested, provided assistance with and participated in completing their respective Centers for Medicare and Medicaid Services (CMS) exercise and drill requirements.
- Participated in the “Sound the Alarm” smoke alarm installation event coordinated by the American Red Cross in conjunction with Allentown Fire Department.
- Collaborated with Allentown Police to promote emergency preparedness messages at 3 crime watch meetings.
- Conducted 3 “Fight the Bite!” outreach events to promote mosquito and tick bite prevention to prevent diseases including West Nile Virus, Zika, Lyme Disease and many other serious diseases.
- Collaborated with PADOH Northeast District Office and the Center for Excellence to distribute 161 doses of free Naloxone during Pennsylvania’s 2 Naloxone Give Away Days.
- Promoted trainings to community partners that may have a supporting role to public health, medical, and mental/behavioral health sectors.

## 2. Community Recovery

- Participated in the City’s Emergency Management Team meetings and provided updates regarding health resources available to sustain a recovery operation.
- Participated in a meeting and discussions with City emergency preparedness and response partners to review recovery planning initiatives.
- Reviewed and updated the Recovery Annex in the City’s PHERP and contact lists in the City of Allentown Emergency Operations Plan (EOP).
- AHB Environmental Health staff re-inspected 3 facilities prior to their re-opening when the facility’s operations were temporarily suspended due to service disruptions (e.g. sewage backups, power loss, building damage by a vehicle).
- Maintained and promoted mental/behavioral health training opportunities for public health staff and volunteers.

### 3. Emergency Operations Coordination

- Coordinated 8 AHB-PHEP meetings to provide updates and coordinate preparedness initiatives with AHB managers, City EMC, Fire Chief, APD Captain, and AHB staff who have PHEP responsibilities.
- Collaborated with Allentown EMC to update contact information for key response personnel.
- Maintained 2 staff that are trained in accordance with Homeland Security Exercise and Evaluation (HSEEP) policies and procedures.

### 4. Emergency Public Information and Warning

- Allentown EMC coordinated with LCEMA Director to update plans to disseminate emergency alerts through CodeRED.
- Emergency alert systems continue to be maintained by LCEMA and by ASD. AHB partners with both agencies and the ability to request emergency alert notices are ongoing.
- Distributed information about the LCEMA's CodeRED emergency alert notification system and promoted registration of cell phones during the 9 Ready! Pack! Go! presentations and two (2) City of Allentown PrepareAthon events.
- AHB continued to collaborate with the City's PIO to develop and disseminate media releases and post announcements to the City of Allentown website.
- Reviewed systems for the Lehigh County Health Information Center (LCHIC).
- Administered ScheduleME, the Online Registration System, enabling 4,106 community members to schedule a reservation to receive a free flu vaccine during the LVHN Drive-Thru Flu Campaign conducted on November 9 and 10, 2019.
- Collaborated with PADOH, City officials and community partners to develop and distribute targeted and population-based public health messages to control and prevent the spread of Measles in the community.

### 5. Fatality Management

- Reviewed the Fatality Management Plan in the City's All-Hazards PHERP.
- Collaborated with LCEMA, Bethlehem Health Bureau (BHB) and the Lehigh County Coroner's Office to hold 2 training sessions on the Lehigh County Mass Fatality Management Plan and completed a tour of Lehigh County Morgue and Lehigh County Joint Operations Center (JOC). A total of 28 individuals attended including AHB staff, AVMRC volunteers, Bethlehem MRC volunteers (BMRC) and Lehigh County CERT volunteers.

## 6. Information Sharing

- On an ongoing basis, AHB staff monitored EpiCenter, Knowledge Center-HIMS, Knowledge Center-NERCTTF, PA-HAN (Health Alert Network), PA-NEDSS (National Electronic Disease Surveillance System), PA-SIIS (Statewide Immunization Information System) and National Outbreak Reporting System (NORS).
- On an ongoing basis, communicable disease cases were monitored and investigated via NEDSS according to established protocols.
- On an ongoing basis, monitored EpiCenter for real-time trends.
- Received updates via Epi-X alerts from Centers for Disease Control on emerging infectious diseases.
- Maintained continual communication with local hospital infection control staff through participation in monthly infection control meetings and as part of routine communicable disease investigations.
- PA-HAN alerts were regularly received and disseminated to staff and partner agencies as appropriate.
- The Recall Roster for 24/7 AHB staff notification and the Staff Emergency Contact Lists were updated each time there were staff changes; quarterly if there were no changes.
- Participated in redundant communications tests conducted by PADOH, including email, telephone, fax, 800 MHz radio and the GETS (Government Emergency Telecommunications) card.
- Participated in conference calls with PADOH and community partners to plan, implement and update the public health response to control and prevent the spread of Measles in the community.

## 7. Mass Care

- Participated in 12 meetings with the Lehigh Valley Shelter Planning Team to discuss and plan ongoing shelter trainings, shelter simulations and exercises for our respective staff and volunteers.
- Collaborated with Lehigh Valley Shelter Planning Team to offer 2 American Red Cross Shelter Fundamental Trainings; 39 individuals attended.
- Collaborated with Lehigh Valley Shelter Planning Team to offer 3 opportunities for volunteers to participate in a Shelter Simulation, a mock shelter scenario to learn, practice and become more familiar with the operations and guidelines of shelter operations: 149 participants in the Shelter Simulations.
- Deployed staff and volunteers to 2 emergency responses that resulted in evacuations and activation of Family Reunification Center and an Emergency Evacuation Shelter.

## 8. Medical Countermeasure Dispensing

- Conducted weekly childhood immunization and adult immunization clinics at AHB, 7 community influenza vaccination clinics and 8 Hep A vaccination clinics.
- Maintained Memorandum of Agreements with ASD, to include 23 school buildings, and East Side Youth Center (ESYC), to include 2 ESYC buildings, in the Point of Dispensing (POD) plan.
- Reviewed and updated the POD survey assessments at 23 Allentown School District buildings, Agri-Plex and ESYC.
- 4 new AHB staff and 4 AVMRC volunteers were trained on the mass vaccination plan and performed functional roles in the LVHN's Community Flu Campaign at Dorney Park and Coca-Cola Park.
- Participated in the planning and implementation in the LVHN 2-day, drive-through Community Influenza Vaccine Campaign. AHB staff and AVMRC volunteers participated in the implementation. Between November 9 -10, 2019, a total of 8,918 individuals received a free flu vaccine.
- Conducted PHEP drills and provided reports to the PADOH-BPHP using the required drill forms. The drills included an AHB Staff Notification (aka call-down) drills; a site activation drill; a facility set-up drill, and a Dispensing Throughput (aka Time Study).

## 9. Medical Material Management and Distribution

- Reviewed and updated, as needed, the equipment inventory list and submitted it to PADOH-BPHP.
- Reviewed and updated the list of emergency preparedness and response supplies, including item name, quantity and storage location.
- Continued discussions regarding storage location(s) for Personal Protective Equipment (PPE).

## 10. Medical Surge

- Reviewed the list of available emergency management and response trainings jointly coordinated by LCEMA and Northampton County EMA and sent SERVPA messages to AVMRC volunteers inviting them to trainings that were appropriate for volunteers.
- Collaborated with community partners to review medical operations plans for mass care shelters and discuss how the plans could be adapted locally utilizing MRC volunteers.

## 11. Non-Pharmaceutical Interventions

- AHB Communicable Disease staff members participated in the infection control committee for the 4 local health networks.
- Implemented mandatory quarantine measures in accordance with CDC guidelines to control and prevent the spread of Measles in our community.



## 12. Public Health Laboratory Testing

- New AHB staff completed Public Health 101, Introduction to Public Health Laboratories training.

## 13. Public Health Surveillance and Epidemiological Investigation

- Conducted reviews of Epi Center reports which highlighted emerging infections within Pennsylvania and the United States.
- Attended statewide meetings conducted by the PADOH Bureau of Epidemiology.
- Conducted a measles investigation to monitor, prevent and control the spread of the disease in the community.
- Participated in conference calls with PADOH-Bureau of Public Health Preparedness, Bureau of Epidemiology and community partners to discuss updates in the measles investigation and the status of quarantine measures in accordance with CDC guidelines.

## 14. Responder Safety and Health

- Reviewed and updated the AHB Respiratory Protection Plan.
- FIT testing was performed on 4 staff and all passed.
- Maintained a local stockpile of PPE to assure the rapid public health response to an infectious disease investigation.

## 15. Volunteer Management

- Participated in 11 MRC Collaboration conference calls with PADOH and the coordinators of other Pennsylvania MRC units.
- Participated in 6 National MRC Well Check Webinar coordinated by the National Association of County & City Health Officials (NACCHO).
- Reviewed the current plan for management of spontaneous volunteers and began researching the plans used by other public health departments and emergency management agencies.
- Continued discussions on existing community resources that can support volunteer post-deployment screenings, assessments and services.
- Participated in 2 SERVPA (Statewide Emergency Registry of Volunteers in Pennsylvania) Administrators trainings.

### **Objective 73 - Achieved**

Utilize the Allentown Volunteer Medical Reserve Corps (AVMRC) to enhance the emergency response capacity by increasing the availability of a trained and skilled workforce of medical and public health professionals and lay volunteers.

- 132 volunteers, including 7 coordinators from other Pennsylvania MRC units, remained affiliated with AVMRC and enrolled in SERVPA.

- Submitted semi-annual reports to PADOH and updated the national MRC web site regarding AVMRC trainings, exercises, drills and deployments.
- Conducted 3 outreach events to provide information about MRC and recruit for new AVMRC volunteers.
- Collaborated with BHB and LCEMA to plan trainings and exercises for MRC and CERT volunteers.
- Collaborated with LVHN, LCEMA and BHB to coordinate an emergency preparedness training and tour at Pocono Raceway two days prior to a NASCAR race. LVHN hosted the training, which showed the coordination among local, state and federal agencies and all the components of preparedness planning and systems in place to respond to all-hazards incidents. 15 attended the training.
- 7 AVMRC volunteers attended one of the trainings on the Lehigh County Mass Fatality Management Plan conducted by the Lehigh County Coroner.
- Acquired and maintained a cache of supplies and protective gear to be made available for AVMRC and CERT activation.
- Conducted 5 Orientation Trainings for 7 prospective and new AVMRC volunteers; all of whom wanted to volunteer with AVMRC, completed 100% SERVPA registration and were approved in SERVPA.
- Incorporated into the new AVMRC volunteers' orientations information about the basic use of SERVPA skills, messaging and responding.
- Utilizing the SERVPA system, sent 13 messages to AVMRC volunteers regarding upcoming trainings.
- Reviewed and updated the AVMRC trainings and exercises incorporated into the 2019-2023 multi-year training and exercise plan (MYTEP).
- 4 AVMRC volunteers participated in the 2017 LVHN Community Flu Campaign. The volunteers were assigned functional roles for which they were responsible during their respective shifts.
- Utilizing the SERVPA system, participated in 2 SERVPA call-down notification drills. The 1<sup>st</sup> AVMRC volunteer call-down drill was conducted on March 14, 2019; 114 AVMRC volunteers were contacted with a request that each respond, "Message Received". 65 AVMRC volunteers responded to the drill – 57% participation. The 2<sup>nd</sup> AVMRC volunteer call-down drill was conducted on September 16, 2019; 116 AVMRC volunteers were contacted with a request that each respond, "Message Received". 62 AVMRC volunteers responded to the drill – 53% participation.
- Participated in the SERVPA operational drill, Juvare Charge, a multi-state, multi-faceted exercise conducted on June 18-19, 2019. Utilizing SERVPA, 116 AVMRC volunteers were contacted with an "availability request" was sent out via SERVPA for assistance with 2, 12-hour shifts; 43 responded with 35 being available for virtual deployment (30%).
- Participated in the multi-state Frankenthrax Exercise on October 29-30, 2019. The exercise scenario was that the South East Metropolitan area of Pennsylvania was infected with an Anthrax agent and the area needed assistance to staff Points of Dispensing (PODs). During the exercise, utilized SERVPA to create a Point of Dispensing (POD) mission, request

AVMRC volunteers to assist at the POD, and develop a roster based upon volunteer availability. The SERVPA availability request was sent to 114 AVMRC volunteers for virtual POD deployment; 51 volunteers responded & 31 were available for virtual deployment (45% response rate w/27% availability).

- Collaborated with LCEMA and BHB to offer instructor-led, classroom trainings on ICS-100 and ICS-700. A total of 39 individuals attended; 11 of whom are affiliated with AVMRC.
- Collaborated with American Red Cross, LCEMA and BHB to offer the American Red Cross Shelter Fundamentals Training. A total of 55 individuals attended; 15 of whom are affiliated with AVMRC.
- Collaborated with Allentown EMS to coordinate 3 First Aid, CPR and AED trainings for AVMRC and CERT volunteers. 34 individuals, including AHB staff, were trained and received a 2-year certification.
- Collaborated with Lehigh Valley Shelter Planning Team to offer 3 Shelter Simulations; 15 individuals affiliated with AVMRC participated in a minimum of 1 Simulation.
- Promoted the 2 Stop the Bleed trainings that LVHN and LCEMA coordinated for AVMRC and CERT volunteers. 52 individuals attended; 14 of whom are affiliated with AVMRC.
- Promoted the Missing Person Search & Rescue training that LCEMA coordinated for volunteers affiliated with AVMRC, BMRC and LC CERT. 24 individuals, including 3 AVMRC volunteers and 1 AHB staff affiliated with AVMRC, attended.
- Promoted the 2 Psychological First Aid trainings that LCEMA coordinated for public health staff and volunteers; 15 individuals affiliated with AVMRC attended the training.
- During the City of Allentown's Employee Safety Day, 3 AVMRC volunteers promoted the importance of family disaster planning, Emergency Go Bags and Vehicle Preparedness Kits.

# LEHIGH COALITION FOR CANCER CONTROL SUMMARY

## Breast Screening & Diagnostic Services (January 1, 2019 -December 31, 2019)

	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	
# FEMALES	164	175	190	228	757	
# MALES / Other	0	1	0	1	2	
Total # Mammos	144	163	180	196	683	100.00%
# Screening Mammos	94	105	117	117	433	63.40%
# Diagnostic Mammos	50	58	63	79	250	36.60%
Total # CBEs	89	112	91	108	400	
Total # Ultrasounds	62	74	66	99	301	
# Returning for Add. Testing	9	18	17	11	55	

Biopsy Recommendations & Results	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	
# Recommended Biopsies	8	5	5	12	30	
# Breast Cancers Detected	3	2	4	3	12	40.0%

Age	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
Total 19 & younger	3	0	1	1	5	0.66%
Total 20-39 years old	20	25	24	33	102	13.44%
Total 40-49 years old	53	63	72	87	275	36.23%
Total 50-64 years old	81	81	87	104	353	46.51%
Total 65 & older	7	7	6	4	24	3.16%
<b>TOTAL</b>	164	176	190	229	759	100.00%

Insurance Status	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
None	152	167	183	217	719	94.36%
Yes - Not Covered	11	6	4	9	30	3.94%
Yes - High Deductible	1	3	3	3	10	1.31%
Medical Assistance	0	0	0	0	0	0.00%
Refused / No Answer	0	3	0	0	3	0.39%
<b>TOTAL</b>	164	179	190	229	762	100.00%

Race	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
White	52	61	56	87	256	33.77%
Hispanic	86	100	109	108	403	53.17%
Black	12	10	13	22	57	7.52%
American Indian or Alaska Native	1	0	1	0	2	
Asian	3	2	5	4	14	1.85%
Other	7	1	2	4	14	1.85%
Refused/No Answer	3	2	4	3	12	1.58%
<b>TOTAL</b>	164	176	190	228	758	99.74%

Limited English Proficiency (LEP)	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
No	98	91	105	147	441	58.18%
Spanish	55	81	79	73	288	37.99%
Other Languages	11	4	6	8	29	3.83%
<b>TOTAL</b>	164	176	190	228	758	100.00%

# **LEHIGH COALITION FOR CANCER CONTROL SUMMARY**

## **Breast Screening & Diagnostic Services (January 1, 2019 -December 31, 2019)**

<b>Marital Status</b>	Jul-Sept 2015	Oct-Dec 2015	Jan-Mar 2016	Apr-Jun 2016	Total	Rate
Single	34	42	43	60	179	23.61%
Married	95	90	103	129	417	55.01%
Widowed	8	6	6	8	28	3.69%
Divorced/Separated	21	35	35	31	122	16.09%
Refused/No Answer	6	3	3	0	12	1.58%
<b>TOTAL</b>	<b>164</b>	<b>176</b>	<b>190</b>	<b>228</b>	<b>758</b>	<b>100.00%</b>

<b>Education</b>	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
Less than High School	28	48	49	31	156	20.58%
High School/GED	66	66	65	102	299	39.45%
Post High School	51	44	55	61	211	27.84%
Master's Degree	7	10	10	19	46	6.07%
Doctorate	1	0	0	0	1	0.13%
Refused/No Answer	11	8	11	15	45	5.94%
<b>TOTAL</b>	<b>164</b>	<b>176</b>	<b>190</b>	<b>228</b>	<b>758</b>	<b>100.00%</b>

<b>Client Type</b>	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
New	96	107	123	146	472	62.19%
Existing	68	69	67	83	287	37.81%
<b>TOTAL</b>	<b>164</b>	<b>176</b>	<b>190</b>	<b>229</b>	<b>759</b>	<b>100.00%</b>

<b>Learned of Program</b>	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
Doctor	31	41	42	55	169	22.30%
Health Care Provider	48	58	64	75	245	32.32%
Outreach Worker	3	4	10	9	26	3.43%
Reminder	23	9	12	16	60	7.92%
Friend/Relative	46	45	39	48	178	23.48%
Flyer/Brochure	1	2	0	2	5	0.66%
Other	5	6	8	15	34	4.49%
Refused/No Answer	7	11	15	8	41	5.41%
<b>TOTAL</b>	<b>164</b>	<b>176</b>	<b>190</b>	<b>228</b>	<b>758</b>	<b>94.59%</b>

**LEHIGH COALITION FOR CANCER CONTROL SUMMARY**
**Pap Test & Gynecologic Testing Services (January 1, 2019 - December 31, 2019)**

	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total
# Women	109	134	142	182	567

Age	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
Total under 21 years old	1	1	1	3	6	1.1%
Total 21-30 years old	14	25	21	34	94	16.6%
Total 31-40 years old	29	33	32	36	130	22.9%
Total 41-50 years old	33	43	42	48	166	29.3%
Total 51-60 years old	20	24	39	44	127	22.4%
Total 61-64 years old	8	6	6	12	32	5.6%
65 years of age & older	4	2	1	5	12	2.1%
<b>TOTAL</b>	<b>109</b>	<b>134</b>	<b>142</b>	<b>182</b>	<b>567</b>	<b>99%</b>

INSURANCE STATUS	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
None	109	134	142	182	567	100.0%
Yes - Not Covered	0	0	0	0	0	0.0%
Yes - High Deductible	0	0	0	0	0	0.0%
Medical Assistance	0	0	0	0	0	0.0%
Refused/No Answer	0	0	0	0	0	0.0%
<b>TOTAL</b>	<b>109</b>	<b>134</b>	<b>142</b>	<b>182</b>	<b>567</b>	<b>100%</b>

RACE	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
White	23	20	26	30	99	17.5%
Hispanic	69	103	100	127	399	70.4%
Black	10	8	9	13	40	7.1%
Asian	3	1	5	4	13	2.3%
Other	4	2	1	4	11	1.9%
Refused/No Answer	0	0	1	4	5	0.9%
<b>TOTAL</b>	<b>109</b>	<b>134</b>	<b>142</b>	<b>182</b>	<b>567</b>	<b>100%</b>

Limited English Proficiency (LEP)	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
No	57	63	74	91	285	50.3%
Spanish	50	70	65	91	276	48.7%
Other Languages	2	1	3	0	6	1.1%
<b>TOTAL</b>	<b>109</b>	<b>134</b>	<b>142</b>	<b>182</b>	<b>567</b>	<b>100%</b>

MARITAL STATUS	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
Single	39	46	42	73	200	35.3%
Married	45	47	69	77	238	42.0%
Widowed	3	3	4	3	13	2.3%
Divorced/Separated	20	37	23	25	105	18.5%
Refused/No Answer	2	1	4	4	11	1.9%
<b>TOTAL</b>	<b>109</b>	<b>134</b>	<b>142</b>	<b>182</b>	<b>567</b>	<b>100%</b>

EDUCATION	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
Less than High School	37	41	38	55	171	30.2%
High School/GED	39	50	45	63	197	34.7%
Post High School	20	31	41	40	132	23.3%
Master's Degree	5	6	8	10	29	5.1%
Doctorate	0	0	0	0	0	0.0%
Refused/No Answer	8	6	10	14	38	6.7%
<b>TOTAL</b>	<b>109</b>	<b>134</b>	<b>142</b>	<b>182</b>	<b>567</b>	<b>100%</b>

CLIENT TYPE	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	Total	Rate
New	68	88	95	127	378	66.7%
Existing	41	46	47	55	189	33.3%
<b>TOTAL</b>	<b>109</b>	<b>134</b>	<b>142</b>	<b>182</b>	<b>567</b>	<b>100%</b>

**LEHIGH COALITION FOR CANCER CONTROL SUMMARY**
**Pap Test & Gynecologic Testing Services (January 1, 2019 - December 31, 2019)**

<b>LEARNED OF PROGRAM</b>	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	<b>Total</b>	<b>Rate</b>
Doctor	30	33	24	37	124	21.9%
Health Care Provider	24	33	38	51	146	25.7%
Outreach Worker	4	9	7	13	33	5.8%
Reminder	9	6	8	10	33	5.8%
Friend/Relative	40	43	60	58	201	35.4%
Flyer/Brochure	0	3	1	3	7	1.2%
Other	2	7	4	10	23	4.1%
Refused/No Answer	0	0	0	0	0	0.0%
<b>TOTAL</b>	<b>109</b>	<b>134</b>	<b>142</b>	<b>182</b>	<b>567</b>	<b>100%</b>

<b>Self-Report of Last Pap Done</b>	Jan-Mar 2019	Apr-Jun 2019	Jul-Sept 2019	Oct-Dec 2019	<b>Total</b>	<b>Rate</b>
Never/No prior Pap	7	14	7	16	44	7.8%
Less than 1 year	2	0	0	1	3	0.5%
1-2 years ago	56	54	72	79	261	46.0%
2-3 years ago	23	41	40	46	150	26.5%
3-5 years ago	16	13	12	31	72	12.7%
5-10 years ago	2	8	10	8	28	4.9%
11-20 years ago	3	4	1	1	9	1.6%
20-30 years ago	0	0	0	0	0	0.0%
More than 30 years ago	0	0	0	0	0	0.0%
Unable to remember	0	0	0	0	0	0.0%
Refused/No Answer	0	0	0	0	0	0.0%
<b>TOTAL</b>	<b>109</b>	<b>134</b>	<b>142</b>	<b>182</b>	<b>567</b>	<b>100%</b>

**HEART DISEASE DEATHS, NUMBER AND RATE**  
**UNITED STATES, PENNSYLVANIA AND LEHIGH COUNTY, 1990 - 2017**

	UNITED STATES		PENNSYLVANIA		LEHIGH COUNTY		ALLENTOWN	
YEAR	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE
1990	720,058	321.8	43,204	337.5	1,046	326.0	NA	NA
1991	720,862	313.8	43,091	325.4	1,011	303.3	NA	NA
1992	717,706	306.1	42,924	313.7	979	283.0	NA	NA
1993	743,460	309.9	43,731	324.1	1,033	302.0	NA	NA
1994	732,409	299.7	43,657	309.9	1,071	303.4	NA	NA
1995	737,563	296.3	42,934	304.6	1,028	289.5	NA	NA
1996	733,361	288.3	43,231	302.6	1,028	286.7	NA	NA
1997	726,974	280.4	41,941	283.3	988	256.8	NA	NA
1998	724,859	272.4	41,282	272.2	1,025	257.5	NA	NA
1999	725,192	267.8	41,420	268.1	997	245.2	364	282.7
2000	710,760	257.6	40,446	270.2	967	242.1	359	277.4
2001	700,142	247.8	39,408	255.3	969	234.9	350	271.6
2002	696,947	240.8	38,291	257.9	888	226.1	314	243.9
2003	685,089	232.1	37,805	250.1	884	220.9	303	237
2004	652,486	217	36,063	234.1	816	201.8	282	217
2005	652,091	211.1	35,896	229	786	191.8	279	214
2006	631,636	200.2	33,414	225.6	784	204.3	260	205
2007	616,067	190.9	32,517	214.9	734	188.1	240	185
2008	617,527	186.7	33,179	207.3	719	168.4	240	192
2009	599,413	180.1	32,056	190.8	660	146.7	206	161
2010	595,444	178.5	31,274	185.3	728	158.6	217	166
2011	596,339	173.7	31,643	184.1	702	149.7	214	164
2012	599,711	170.5	30,522	175.2	729	152.4	213	162
2013	611,105	169.8	31,537	178.4	694	144.7	182	140
2014	614,348	167	31,179	174.7	750	152.2	217	168
2015	633,842	197.2	31,875	176.8	748	151.7	246	188.9
2016	635,260	165.5	31,899	175.8	769	154.1	211	163.2
2017	647,457	165	32,237	175.7	737	148.9	197	156

\* Rate per 100,000 population (age adjusted)

Source: National data obtained from CDC website

State and County data obtained from Pa Dept of Health Website

Allentown data obtained from Pa Dept of Health Website and Penn State Data Center



B-1

**OVERWEIGHT AND OBESE RATES FOR YOUTH  
PENNSYLVANIA, LEHIGH COUNTY, ALLENTOWN SCHOOL DISTRICT GRADES K-12  
2007-2019**

YEAR	PENNSYLVANIA SCHOOLS			LEHIGH COUNTY SCHOOLS			ALLENTOWN SCHOOL DISTRICT	
	Overweight	Obese		Overweight	Obese		Overweight	Obese
2007-08	15.5%	16.9%		21.2%	17.8%		22.0%	26.0%
2008-09	15.8%	16.8%		19.7%	16.8%		18.0%	22.0%
2009-10	16.3%	17.5%		20.4%	19.0%		17.0%	23.0%
2010-11	16.3%	17.1%		16.2%	18.2%		18.0%	24.0%
2011-12	16.1%	17.0%		18.3%	16.4%		16.0%	20.0%
2012-13	22.0%	17.1%		18.2%	16.6%		18.0%	23.0%
2013-14	15.8%	17.2%		16.3%	17.8%		17.4%	22.5%
2014-15	15.6%	17.4%		16.0%	17.8%		17.4%	22.5%
2015-16	15.8%	17.8%		17.3%	17.8%		16.5%	22.6%
2016-17	16.0%	17.5%		16.0%	17.3%		16.7%	22.2%
2017-18	16.3%	18.0%		15.7%	18.1%		16.8%	22.5%
2018-19	N/A	N/A		N/A	N/A		16.4%	23.4%

B-2

BMI Definitions: Overweight- 85th to less than the 95th percentile, Obese- equal to or greater than the 95th percentile

[https://www.cdc.gov/healthyweight/assessing/bmi/childrens\\_bmi/about\\_childrens\\_bmi.html](https://www.cdc.gov/healthyweight/assessing/bmi/childrens_bmi/about_childrens_bmi.html)

Sources: Pennsylvania and Lehigh County data- PaDOH School Health Statistics Growth Screening Program

<http://www.health.pa.gov/My%20Health/School%20Health/Pages/Quick%20Links/Mandated%20School%20Health%20Program/Growth-Screen.aspx#.Wmn4QKinHcv>

Allentown School District- Sapphire data



**OVERWEIGHT AND OBESITY RATES FOR ADULTS**  
**UNITED STATES, PENNSYLVANIA, LEHIGH COUNTY, REGIONAL DATA 2007-2019**

	US		PA		LEHIGH COUNTY		LEHIGH VALLEY		LEHIGH, NORTHAMPTON CARBON COUNTIES	
YEAR	Overwt	Obese	Overwt	Obese	Overwt	Obese	Overwt	Obese	Overwt	Obese
2007	N/A	N/A	63%	28%	N/A	N/A	N/A	N/A	65%	28%
2008	N/A	N/A	64%	28%	N/A	N/A	N/A	N/A		
2009	N/A	N/A	64%	28%	N/A	N/A	N/A	N/A		
2010	N/A	N/A	66%	29%	N/A	N/A	N/A	N/A	62%	29%
2011	N/A	36.5%	65%	29%	N/A	27%	N/A	N/A		
2012	N/A		65%	29%	N/A	29%	N/A	28%		
2013	N/A		65%	30%	N/A	29%	N/A	N/A	68%	30%
2014	N/A	39.8%	64%	30%	N/A	28%	N/A	N/A		
2015	N/A		66%	30%	N/A	29%	N/A	N/A		
2016	N/A		65%	30%	N/A	29%	N/A	N/A	63%	31%
2017	N/A	N/A	67%	32%	N/A	30%	N/A	N/A		
2018	N/A	N/A	66%	31%	N/A	31%	N/A	N/A		
2019	N/A	N/A	N/A	N/A	N/A	30%	N/A	N/A	N/A	N/A

B-3

BMI Definitions: BMI 25.0 to <30 falls within the overweight range. BMI 30.0 or higher falls within the obese range.

<https://www.cdc.gov/obesity/adult/defining.html>

Sources: United States: Ogden CL, Carroll MD, Fryar CD, Flegal KM. Prevalence of obesity among adults and youth: United States, 2011–2014. NCHS data brief, no 219. Hyattsville, MD: National Center for Health Statistics. 2015.

United States, 2015-16: <https://www.cdc.gov/nchs/data/databriefs/db288.pdf>

Pennsylvania Rates: PaDOH EDDIE- BRFSS- STATE

Regional Rates (Carbon, Lehigh, Northampton Counties): 3 year summary period -PaDOH EDDIE- BRFSS- REGION

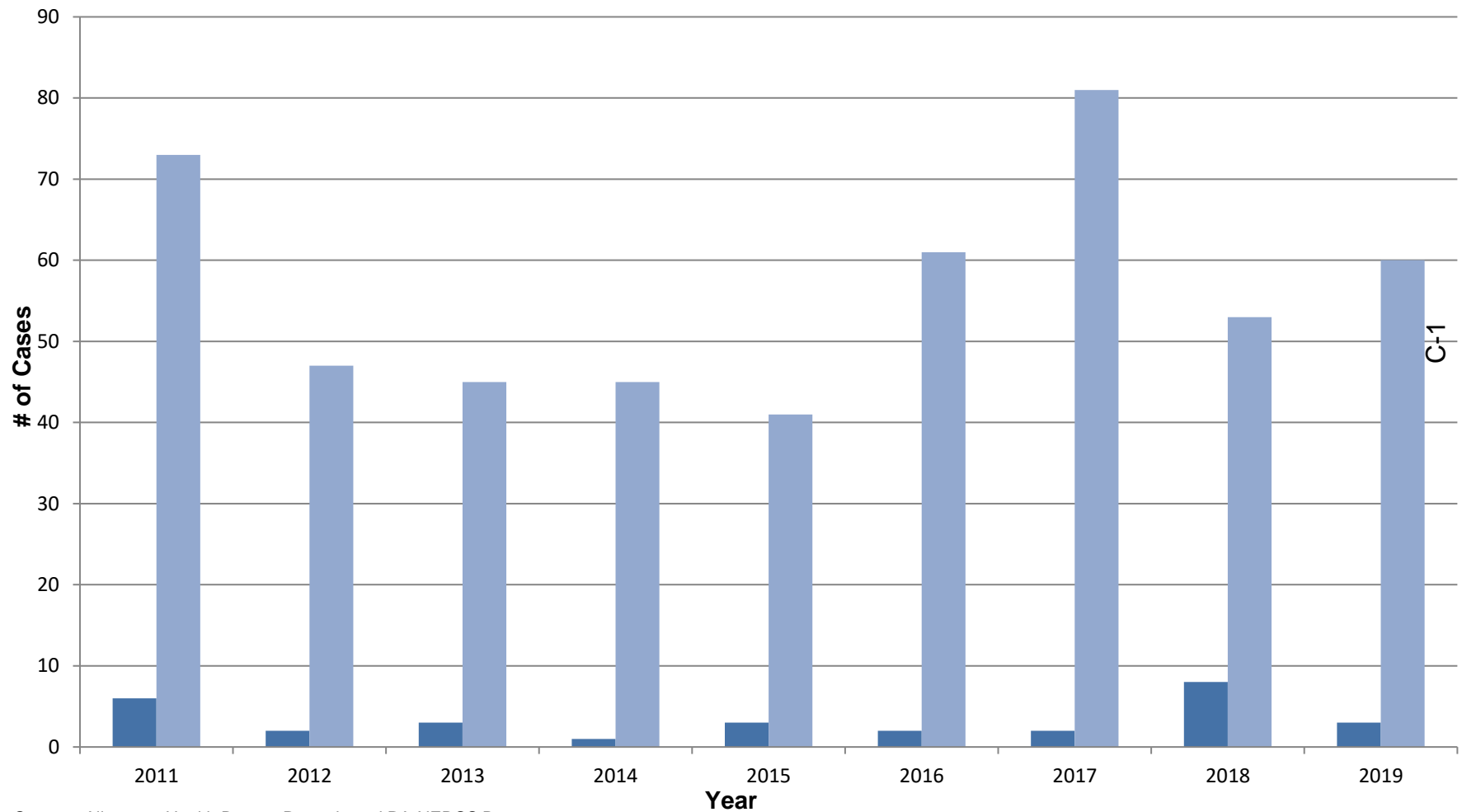
Lehigh County Rates: County Health Rankings, Robert Wood Johnson Foundation

Lehigh Valley Rate (Lehigh and Northampton Counties): 2016 Community Health Profile



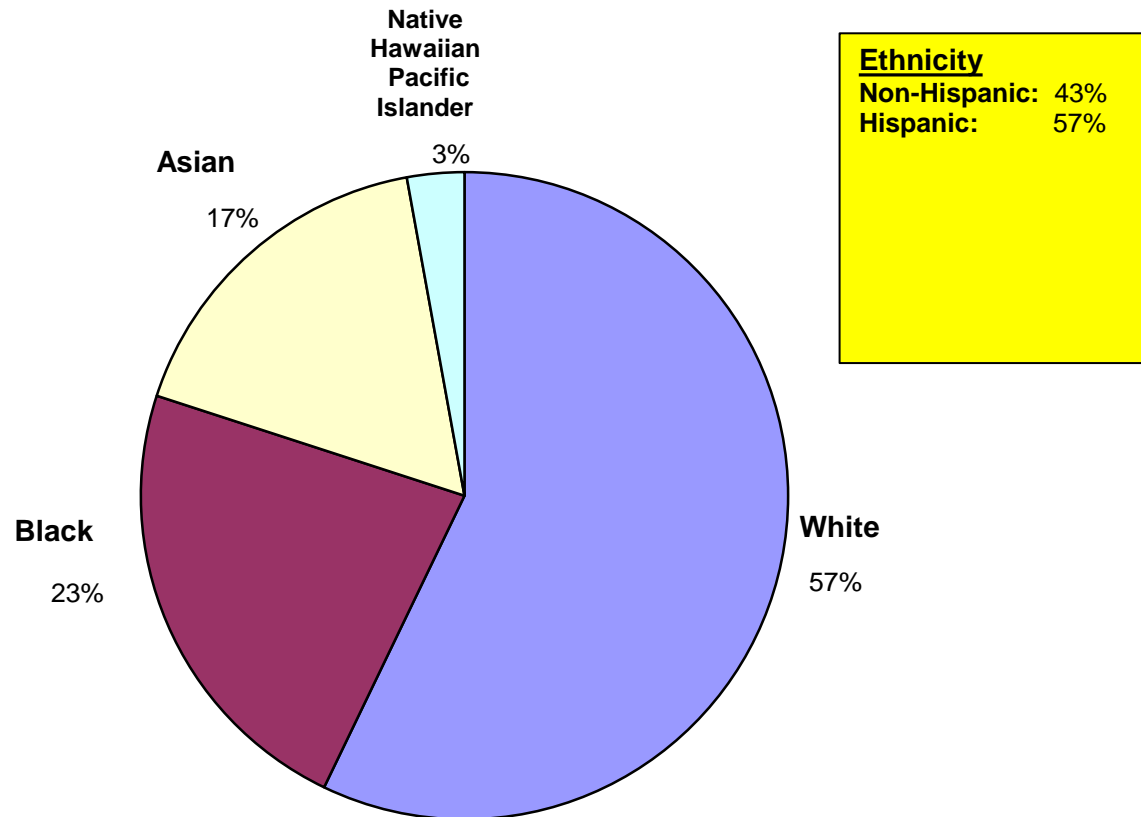
# Active TB & Latent TB Infection Cases City of Allentown 2011- 2019

■ # of Cases Active  
■ LTBI



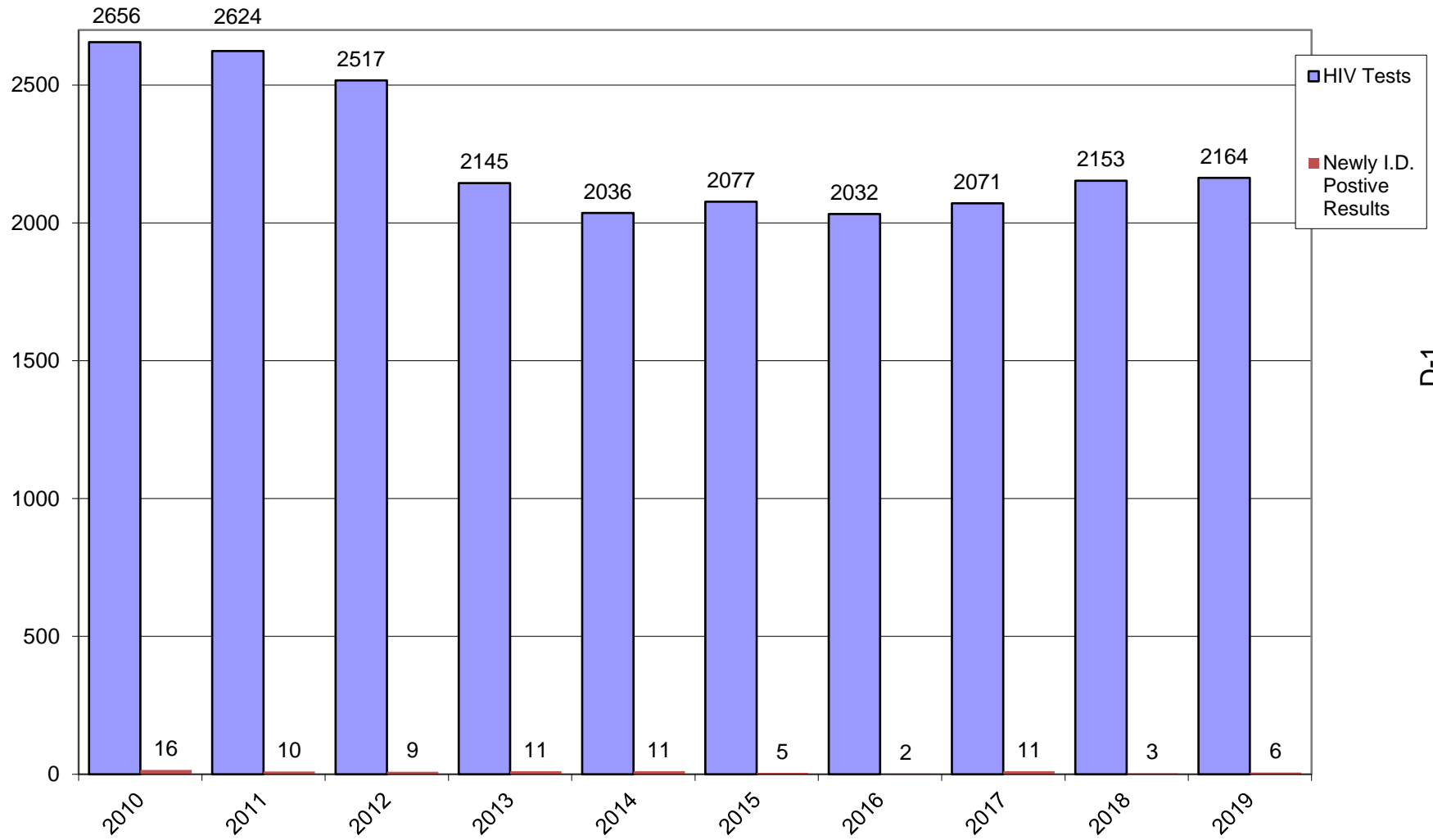
Source: Allentown Health Bureau Records and PA-NEDSS Data

# Active TB Cases by Race/Ethnicity City of Allentown 2010 - 2019



C-2

City of Allentown  
Allentown Health Bureau  
HIV Tests Performed & Number of Positive HIV Test Results  
2010 - 2019



D-1